. NAME & PHONE OF CONTACT AT FILER [optional]					
SEND ACKNOWLEDGMENT TO: (Name and Address)	NYC				
Corporation Service Company 1133 Avenue of the Americas Suite 3100 New York NY 10036					
930678-3					
INITIAL FINANCING STATEMENT FILE #	THE ABOVE		R FILING OFFICE US S FINANCING STATEME		
200603205220 Date:01/26/2006 B: P:			to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.		
TERMINATION: Effectiveness of the Financing Statement ide  CONTINUATION: Effectiveness of the Financing Statement					
CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law.	t identified above with respect to security interest(s) of the Sec	ured Party auth	orizing this Continuation	Statement is	
ASSIGNMENT (full or partial): Give name of assignee in item	1 7a or 7b and address of assignee in item 7c; and also give name	ne of assignor in	item 9		
AMENDMENT (PARTY INFORMATION): This Amendment					
Also check one of the following three boxes and provide appropriate		, <u></u> 5			
CHANGE name and/or address: Please refer to the detailed instruction in regards to changing the name/address of a party.	ons DELETE name: Give record name to be deleted in item 6a or 6b.	ADD	name: Complete item 7a or	7b, and also item 7	
CURRENT RECORD INFORMATION:	to be deseted in item of or ob.	also t	also complete items 7e-7g (if app		
6a. ORGANIZATION'S NAME		**			
O INDIVIDUALIO LAGINATIO			MIDDLE NAME SUFFIX		
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	MIDDLE NAME		
The Bank of Nova Scotia		MIDDLE NAME		TSUFFIX	
	FIRST NAME	MIDDLE			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME  CITY	MIDDLE	POSTAL CODE	COUNTR	
· L				COUNTR' USA	
7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  DE Liberty Plaza  SEE INSTRUCTIONS   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR	CITY New York  ANIZATION 7f. JURISDICTION OF ORGANIZATION	STATE NY	POSTAL CODE		
MAILING ADDRESS THE LIBERTY PLAZA  SEEINSTRUCTIONS  ADD'LINFORE TO TYPE OF ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one body one collateral deleted or added, or give entire respectively. The collateral deleted or added to the collateral de	CITY New York  NIZATION 7f. JURISDICTION OF ORGANIZATION  ox.  estated collateral description, or describe collateral assign  assign  NG THIS AMENDMENT (name of assignor, if this is an Assign	STATE NY 7g. ORG	POSTAL CODE 10006  ANIZATIONAL ID #, if ar	USA Y	
MAILING ADDRESS THE LIBERTY PLAZA  SEEINSTRUCTIONS  ADD'L INFORE TO TYPE OF ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one but on the control of the co	CITY New York  NIZATION 7f. JURISDICTION OF ORGANIZATION  ox.  estated collateral description, or describe collateral assign  assign  NG THIS AMENDMENT (name of assignor, if this is an Assign	STATE NY 7g. ORG	POSTAL CODE 10006  ANIZATIONAL ID #, if ar	USA Y	
MAILING ADDRESS THE LIBERTY Plaza  SEEINSTRUCTIONS  ADD'L INFORE TO TYPE OF ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one body one collateral deleted or added, or give entire results of the collateral deleted or added to the collateral deleted or dele	CITY New York  NIZATION 7f. JURISDICTION OF ORGANIZATION  ox.  estated collateral description, or describe collateral assign  assign  NG THIS AMENDMENT (name of assignor, if this is an Assign	STATE NY 7g. ORG	POSTAL CODE 10006  SANIZATIONAL ID #, if ar	USA Y	