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CC FINANCING STATEMENT AMENDME	=NT		•			
DLLOW INSTRUCTIONS (front and back) CAREFULLY	-141	And the second			·	
NAME & PHONE OF CONTACT AT FILER [optional]						
Phone (800) 331-3282 Fax (81	18) 662-4141					
SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 7185 SNAP	ON CREDIT					
T 100 SIVAL						
UCC Direct Services 114989	991			•		
P.O. Box 29071						
Glendale, CA 91209-9071 RIRI						
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INITIAL FINANCING STATEMENT FILE #	1		1b. This	FINANCING STAT	TEMENT AMEN	DMENT
200401827750 16-DEC-2004 SS RI			ILI 10 D	e filed [for record] (AL ESTATE RECOR	or recorded) in 1 RDS,	the .
X TERMINATION: Effectiveness of the Financing Statement identified above	ve is terminated with	respect to security interest(s) of	f the Secured	Party authorizing ti	his Termination	Stateme
CONTINUATION: Effectiveness of the Financing Statement identified above	ve with respect to the	security interest(s) of the Secu	red Party aut	horizing this Contin	uation Statemer	nt is
continued for the additional period provided by applicable law.						
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7l	b and address of a	assignee in 7c; and also giv	e name of a	ssignor in item 9	· ·	
MENDMENT (PARTY INFORMATION): This Amendment affects Def	btor <u>or</u> Secur	ed Party of record. Check only				
Also check one of the following three boxes and provide appropriate info CHANGE name and/or address: Give current record name in item 6a or 6b; also	ormation in items 6					
name (if name change) in item 7a or 7b and/or new address (if address change)	give new) in item 7c.	DELETE name: Give record n to be deleted in item 6a or 6b.		ADD name: Comple tem 7c; also comple		
URRENT RECORD INFORMATION:					ste itelito i a i g	(ii appiio
6a. ORGANIZATION'S NAME					<u> </u>	
WOONSOCKET CAR CARE, INC.						
6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	AME	SU	IFFIX
6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	AME .	SU	JFFIX
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