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SEND ACKNOWLEDGEMENT TO. (Name and Mailing Address) 10729 BANC OF AMERIC CT Lien Solutions 37792735 P.O. Box 29071 Glendale, CA 91209-9071 RIRI INITIAL FINANCING STATEMENT FILE # 201211236530 29-MAY-2012 SS RI TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement Continued for the additional princing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional princing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional princing principle in them 7s or 7b and address of assignee in 7c; and also give name of assignor in item 9. MENDMENT (PARTY INFORMATION): This Amendment affects \(\frac{1}{2} \) Petrox \(\frac{1}{2} \) Secured Party of record. Check only ging of these two boxes. Also check ging of the following three boxes and growtide appropriate information in litems 8 and/or 7. CHANGE name and/or address. Cive current record name in item 8a or 6b; also give new CHANGE name and/or address. Cive current record name in item 8a or 6b; also give new CHANGE name and/or address. Cive current record name in item 8a or 6b; also give new CHANGE name and/or address. Cive current record name in item 8a or 6b; also give new CHANGE name and/or address. Cive current record name in item 8a or 6b; also give new CHANGE name and/or address. Cive current record name in item 8a or 6b; also give new CHANGE name and/or address. Cive current record name in item 8a or 6b; also give new CHANGE name and/or address. Cive current record name in item 8a or 6b; also give new CHANGE name and/or address. Cive current record name in item 8a or 6b; also give new CHANGE name and/or address. Cive current record name in item 8a or 6b; also give new CHANGE name and/or address. Cive current record	SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 10729 BANC OF AMERIC CT Lien Solutions 37792735 P.O. Box 29071 Glendale, CA 91209-9071 INITIAL FINANCING STATEMENT FILE # 201211236530 29-MAY-2012 SS RI TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional period provided by applicable lew. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. MENDMENT (PARTY INFORMATION): This Amendment affects X Debtor or Secured Party of record, Check only one of these two boxes. Also check dags of the following three boxes and provide appropriate information in items 6 and/or 7. Also check one of the following three boxes and provide appropriate information in items 8 and/or 7. Also check one of the following three boxes and provide appropriate information in tems 8 better in tems 6 and/or 7. Also check one of the following three boxes and provide appropriate information in tems 8 better in tems 6 and/or 7. Also check one of the following three boxes and provide appropriate information in tems 8 better in tems 6 better in tems 6 and/or 7. Also check one of the following three boxes and provide appropriate information in tems 8 better in tems 6 and/or 7. Also check one of the following three boxes and provide appropriate information in tems 8 better in tems 6 and/or 7. Also check one of the following three boxes and provide appropriate information in tems 8 better in tems 6 and/or 7. Also check one of the following three boxes and provide appropriate information in tems 8 better in tems 6 and/or 7. Also check one of the following three boxes and provide appropriate information in tems 8 and/or 7. Also check one of the following three boxes and provide appropriate information in tems 8 and/or 7. Also check one of the following three boxes and provide appropriate	NAME & PHONE OF C		•	18) 662-4141				
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10. OPTIONAL FILER REFERENCE DATA
37792735 Debtor Name: HILL AND HARBOUR VETERINARY CENTER, LLC OMBNAA001UT4 779:9202081:000653507

FIRST NAME

SUFFIX

MIDDLE NAME

9a. ORGANIZATION'S NAME Bank of America, N.A

9b. INDIVIDUAL'S LAST NAME

OR