П	ICC FINANCING STATEMENT AMENDMEN	IT				
	OLLOW INSTRUCTIONS	• •				
F	. NAME & PHONE OF CONTACT AT FILER (optional)		7			
ı	Kathleen Gude -508-946-8766					
B	E-MAIL CONTACT AT FILER (optional)		1			
	loanoperations@rocklandtrust.com SEND ACKNOWLEDGMENT TO: (Name and Address)		4			
ľ		_]			
ı	Rockland Trust Company	ľ				
ı	30 South Main Street Middleboro, MA 02346		İ			
ı	Miduleboro, MA 02540					
ı		1				
L			THE ABOVE SP	ACE IS FOR FILING OFFICE USE	ONLY	
	. INITIAL FINANCING STATEMENT FILE NUMBER 200907584120 filed 6/19/2009		1b. This FINANCING STATE (or recorded) in the REA	EMENT AMENDMENT is to be filed [for AL ESTATE RECORDS	record]	
			Filer: attach Amendment A	ddendum (Form UCC3Ad) and provide Debt		
2.	TERMINATION: Effectiveness of the Financing Statement identified abort Statement	ve is terminated w	rith respect to the security inter	est(s) of Secured Party authorizing this	Termination	
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8						
_						
4.	CONTINUATION: Effectiveness of the Financing Statement identified at continued for the additional period provided by applicable law	dove with respect	to the security interest(s) of Se	scured Party authorizing this Continuati	on Statement is	
5.	PARTY INFORMATION CHANGE:				•	
	Check one of these two boxes: AND Check one of these three boxes to:					
	This Change affects Debtor or Secured Party of record item 6		a or 7b <u>and</u> item 7c 7a or 7l	to be deleted in	Give record name item 6a or 6b	
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAME						
	Pentecostal Church-House of Prayer					
OF	INDIVIDUAL'S SURNAME FIRST PERSON.		AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
				, , , , , , , , , , , , , , , , , , , ,		
7.	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informat	ion Change - provide o	nly one name (7a or 7b) (use exact, full i	name; do not omit, modify, or abbreviate any part o	f the Debtor's name)	
7a. ORGANIZATION'S NAME						
OR	7b. INDIVIDUAL'S SURNAME					
), INDIVIDUAL 3 SURMANIE					
INDIVIDUAL'S FIRST PERSONAL NAME						
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX	
7c.	MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY	
8. [COLLATERAL CHANGE: Also check one of these four boxes: ADD	collateral	DELETE collateral	RESTATE covered collateral	ASSIGN collateral	
	Indicate collateral:					
				•		
			•			
9. 1	NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN	MENDMENT: Pri	ovide only one name (9a or 9b) (name of Assignor, if this is an Assignme	nt\	
ı	is is an Amendment authorized by a DEBTOR, check here 📗 and provide name of authorizing Debtor					
	a. ORGANIZATION'S NAME Dead dand Trust Company					
OR	Rockland Trust Company 9b. INDIVIDUAL'S SURNAME	FIRST PERSONA	LNAME	TADDITIONAL MADICIONALITY	OUES:	
	20. INDITIONE O CONTAMIL.	FIRST PERSONA	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
10	I OPTIONAL FILER REFERENCE DATA:	<u> </u>		<u> </u>	<u> </u>	
	I SOS					