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	_				
UCC FINANCING STATEMENT AMENDMEN FOLLOW INSTRUCTIONS	T				
		7			
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294  B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)  97225303 - 366960 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703  Filed In: Ri		rom			
SPRFiling@cscinfo.com	<u> Pinic</u>				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	's <sub>C//</sub> , _				
97225303 - 366960					
Corporation Service Company 801 Adlai Stevenson Drive					
Springfield, IL 62703 Filed In: Ri	node Island				
	(S.O. <u>S.)</u>		SPACE IS FO	R FILING OFFICE	USE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER		1b. This FINANCING S		NDMENT is to be file	ed [for record]
478177 06/10/1985		Filer, <u>attach</u> Amendm	ent Addendum (For	m UCC3Ad) and provid	e Debtor's name in item 13
TERMINATION: Effectiveness of the Financing Statement identified above     Statement	ve is terminated	with respect to the security	interest(s) of Sec	cured Party authorizi	ng this Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7     For partial assignment, complete items 7 and 9 and also indicate affected of			name of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified at continued for the additional period provided by applicable law	pove with respec	t to the security interest(s)	of Secured Party	authorizing this Con	tinuation Statement is
5. PARTY INFORMATION CHANGE:					
Check one or these two boxes.	e of these three li kGE name and/or	address: CompleteAl	DD name: Comple	te itemDELETE (	name: Give record name
This Change affects Debtor or Secured Party of record item 6.  CURRENT RECORD INFORMATION: Complete for Party Information Change.	a or 6b; <u>and</u> item	7a or 7b <u>and</u> item 7c7a	a or 7b, <u>and</u> item 7	to be dele	ted in item 6a or 6b
6a. ORGANIZATION'S NAMERazee Motorcycle Center, Inc.	ige - provide oni	OTE Name (Oa Or Ob)			
OR THE STATE OF TH	T		Landizio	NA MARKETON CONTRACTOR	L(S) SUFFIX
6b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITIAI	L(3) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informat	I tion Change - provide	only <u>one</u> name (7a or 7b) (use exa	ct, fu <b>ll</b> name; do not or	nit, modify, or abbreviate ar	ny part of the Debtor's name)
7a. ORGANIZĂTION'S NAME					
OR 7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
		apper			
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: ADI	D collateral	DELETE collateral	RESTATE C	overed collateral	ASSIGN collateral
Indicate collateral:			_		_
25000					
<ol> <li>NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AI         If this is an Amendment authorized by a DEBTOR, check here  and provide in</li> </ol>	MENDMEN1: name of authoriz		r 9b) (name of As	signor, if this is an As:	signment)
9a. ORGANIZATION'S NAMEBMW of North America, LLC					
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL	L(S) SUFFIX
		<u>-</u>			,
10. OPTIONAL FILER REFERENCE DATA: Debtor: Razee Motorc	ycle Cente	r, Inc 68245	<u> </u>		07225202

97225303