2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement 3. ASSIGNMENT (not or partial). Provide name of Assignee in tiem 7 or 75 agg address of Assignee in tiem 7 or 75 agg address of Assignee in the 70 or 75 agg address of Assignee in the 70 or 75 agg address of Assignee in					
RAME & PRODU PICONACT AT FILER (patronal) Corporation Service Company 1-800-858-5294 E-MAIL CONTACT AT FILER (patronal) SPREPTING (SCIDITA) C SEAD ACKNOWLEGAMENT TO (Name and Address) SPREPTING (SCIDITA) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 150 (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 151 (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 152 (SCIDITA) 153 (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 154 (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 155 (S.O.S.) THE ABOVE S					
RAME & PRODU PICONACT AT FILER (patronal) Corporation Service Company 1-800-858-5294 E-MAIL CONTACT AT FILER (patronal) SPREPTING (SCIDITA) C SEAD ACKNOWLEGAMENT TO (Name and Address) SPREPTING (SCIDITA) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 150 (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 151 (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 152 (SCIDITA) 153 (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 154 (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 155 (S.O.S.) THE ABOVE S	•				
RAME & PRODU PICONACT AT FILER (patronal) Corporation Service Company 1-800-858-5294 E-MAIL CONTACT AT FILER (patronal) SPREPTING (SCIDITA) C SEAD ACKNOWLEGAMENT TO (Name and Address) SPREPTING (SCIDITA) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 150 (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 151 (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 152 (SCIDITA) 153 (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 154 (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 155 (S.O.S.) THE ABOVE S	LICC FINIANCING STATEMENT A MENI	SMENIT			
Corporation Service Company 1-800-858-5294		JMEN I			
B. E-MILL CONTACT AT FILER (Reptones) SPRFILING (SCSCIAITO, COMPANY) C. SEND ACKNOWLEDGMENT TO. (Name and Address) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY Is INTIAC FINANCING STATEMENT FILE NUMBER Corporation Service Company Soft Adial Severemon Drive Springfield, IL 62703-426			7		
18. INTIAL FINANCING STATE WAT JAKENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creation of the production of the production of the recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS to be fined for recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IN THE POSTAL CODE THE FINANCIN	Corporation Service Company 1-800-858	-5294	4		
18. INTIAL FINANCING STATE WAT JAKENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creation of the production of the production of the recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS to be fined for recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IN THE POSTAL CODE THE FINANCIN	SPRFiling@cscinfo.com	.ac			
18. INTIAL FINANCING STATE WAT JAKENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creation of the production of the production of the recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS to be fined for recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IN THE POSTAL CODE THE FINANCIN	C. SEND ACKNOWLEDGMENT TO: (Name and Address)	"into	1		
18. INTIAL FINANCING STATE WAT JAKENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creation of the production of the production of the recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS to be fined for recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IN THE POSTAL CODE THE FINANCIN	107037487 - 348680 - 10/22/2015	isc.			
18. INTIAL FINANCING STATE WAT JAKENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creation of the production of the production of the recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS to be fined for recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IN THE POSTAL CODE THE FINANCIN	Prepared By:				
18. INTIAL FINANCING STATE WAT JAKENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creation of the production of the production of the recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS to be fined for recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IN THE POSTAL CODE THE FINANCIN	801 Adlai Stevenson Drive	iled In: Rhode Island			
18. INTIAL FINANCING STATE WAT JAKENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creatodely in the RAL ESTATE EXPONENT AMENOMENT IS to be fined for recordly in creation of the production of the production of the recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS to be fined for recorded in the RAL ESTATE EXPONENT INTIAL IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IS THE POSTAL CODE THE FINANCING STATE WAT JAKENOMENT IN THE POSTAL CODE THE FINANCIN	Springfield, IL 62703-4261	(S.O.S.)			
200603400030 3/20/2006 To recorded in the REAL EXTERECORDS The abbid intermental Advanced professional production better frame in Aem 13. The ASSIGNMENT (full or partial): Provide name of Assignee in item 7e or 7b. gng audites of Assignee in Item 7e or 7b. gng audites of Assignee in Item 7e or 7b. gng audites of Assignee in Item 7e or 7b. gng audites of Assignee in Item 7e or 7b. gng audites of Assignee in Item 7e or 7b. gng audites of Assignee in Item 7e or 7b. gng audites of Assignee in Item 7e or 7b. gng audites of Assignee in Item 7e or 7b. gng audites of Assignee in Item 7e or 7b. gng audites of Assignee in Item 7e or 7b. gng audites of Assignee in Item 7e or 7b. gng audites of Assignee in Item 7e or 7b. gng and the 7e or 7b. gng and the 7e or 7b. gng and the 7e or 7b. gng and 1e or 7b. gng of Item 1e or 8b. gng of	1a. INITIAL FINANCING STATEMENT FILE NUMBER				
2 TRAINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement Statement Statement (and partially Provide name of Assignee in item 7e or 7b. and darks of Assignee in item 7e or 7b. and darks of Assignee in item 7e or 7b. and darks of Assignee in item 8 or 7b. and darks of Assignee in item 8 or 7b. and darks of Assignee in item 8 or 7b. and darks of Assignee in item 9 or 7b. and darks of Assignee in i	200603400030 3/20/2006	:	(or recorded) in the REA	AL ESTATE RECORDS	•
3 ASSIGNMENT (till or partial): Provide name of Assignee in item 7e or 7b, aggl address of Assignee in item 7c aggl name of Assignor in item 9 propriet assignment, complete frems 7 and 9 aggl also indicate affected collateral in Item 8 4 CONTINUATION: Effectivement and 9 aggl also indicate affected collateral in Item 8 5 PARTY INFORMATION: Complete frems 7 and 9 aggl also indicate affected collateral in Item 8 5 PARTY INFORMATION CHANGE: 6 PARTY INFORMATION CHANGE: 7 PARTY INFORMATION CHANGE: 8 PARTY INFORMATION CHANGE: 9 PARTY INFORMATION CHANGE: 10 PARTY INFORMATION CHANGE: 10 PARTY INFORMATION CHANGE: 10 PARTY INFORMATION CHANGE: 10 PARTY INFORMATION CHANGE: 11 PARTY INFORMATION CHANGE: 12 PARTY INFORMATION CHANGE: 13 PARTY INFORMATION CHANGE: 14 PARTY INFORMATION CHANGE	TERMINATION: Effectiveness of the Financing Statement ide Statement	entified above is terminated			
For partial assignment, complete teams of the Francing Statement Identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable taker AND Check agg of these two boxes. AND Check agg of these two boxes. Check agg of these two boxes. AND Check agg of these there boxes to complete the control of the party authorizing the action of th		tom 7s or 7h and address a	f Ancience in New Years		
Continued for the additional period provided by applicable law	For partial assignment, complete items 7 and 9 <u>and</u> also indicate	e affected collateral in item	r Assignee in item 7c <u>and</u> name B	of Assigner in item 9	
5. PARTY INFORMATION CHANGE: Check agg of these two boxes: Change affects Debtor at Secured Party of record listen 6 at 9th against 75 and 18m 7c 75 and 18m	 CONTINUATION: Effectiveness of the Financing Statement is continued for the additional period provided by applicable law 	dentified above with respec	to the security interest(s) of Se	cured Party authorizing this Continua	ition Statement is
Check aga of these two boxes: AND Check aga of these two boxes to CHANGE and					
This Change effects Debtor or Secure Party of record Internit ac of the paid item? to 2 or 7b and item? to 2 or 7b, and item? to 3 or 7b, and item?					
See ORGANIZATION'S NAME DEBTOR = PJP SERVICES INC. OR 66 INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX ORGANIZATION'S NAME ORGANIZATION'S NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME ORGANIZATION NAME COLLATERAL CHANGE: Also check gog of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral DEBTOR, theck here and provide name of authorizing Debtor First PERSONAL NAME ORGANIZATION'S NAME ORGANIZATION'S NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral DELETE collateral RESTATE covered collateral ASSIGN collateral indicate collateral DELETE collateral RESTATE covered collateral State Postateral ASSIGN collateral Indicate collateral DELETE collateral RESTATE covered collateral State Postateral RESTATE covered collateral State Postateral RESTATE covered collateral DELETE collateral RESTATE covered collateral RESTATE Covered Collateral RESTATE Covered Collateral RESTATE COVERED RESTATE COVERED RESTATE COVERED RESTATE COVERED RESTATE RESTATE COVERED RESTATE COVERED RESTATE RESTATE COVERED RESTATE RESTATE COVERED RESTATE COVERED RESTATE RESTATE COVERED RESTATE RESTATE COVERED RESTATE RESTATE COVERED RESTATE RESTATE RESTATE COVERED RESTATE RE		item 6a or 6b; and item	7a or 7b <u>and</u> item 7c 7a or 7l		
Be Individual's Surname First Personal Name First Personal Name First Personal Name Additional Name(sylinitial(s) Suffix CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only gog name (7a or 7a) (use exact full name, do not one, modify, or abbrevate any part of the Debtar's name) 75. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(Sylinitial(S) CITY STATE POSTAL CODE COUNTRY COLLATERAL CHANGE: Also check gog of these four boxes: ADD collateral Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only gog name (9s or 9b) (name of Assignor, if this is an Assignment) if this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 98. ORGANIZATION'S NAME COMERICA BANK 89. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX SUFFIX SUFFIX DO OPTIONAL FILER REFERENCE DATA 97414 - P.IP SERVICES INC.	 CURRENT RECORD INFORMATION: Complete for Party Inform 6a. ORGANIZATION'S NAMEDERTOR = P.IP SERVIC 	nation Change - provide only	one name (6a or 6b)		
SUFFIX		DEG 1140.			
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) C. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY COLLATERAL CHANGE: Also check gag of these four boxes: ADD collateral Indicate collateral NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only gag name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a ORGANIZATION'S NAMECOMERICA BANK 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX O OPTIONAL FILER REFERENCE DATA 97414 - P.IP SERVICES INC	6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
76. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) C. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral Indicate collateral Indicate collateral NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 98 ORGANIZATION'S NAMECOMERICA BANK 99. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	CHANGED OR ADDED INFORMATION: Complete for Assignment or	Party Information Change - provide	inhi one name (7a or 7h) (use evert full i	rame de set amit madié, as abbreviate any and	of the Debter's serve)
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) C. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY COLLATERAL CHANGE: Also check gas of these four boxes: ADD collateral Indicate collateral NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only gas name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a ORGANIZATION'S NAME COMERICA BANK 9b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX D. OPTIONAL FILER REFERENCE DATA 97414 - P.IP SERVICES INC	7a. ORGANIZATION'S NAME	ory mornation onlings - provide	my one name (72 or 72) (use exact, full)	lane, up not offic, mounty, or abbreviate any pair	or the Debitor's name)
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) C. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME COMERICA BANK 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX D. OPTIONAL FILER REFERENCE DATA-97414 - P.IP SERVICES INC	OR 76 INDIVIDUAL'S SURNAME	· = 17 841			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) C. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY ASSIGN collateral Indicate collateral NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only gag name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a ORGANIZATIONS NAME COMERICA BANK Po. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX SUFFIX	, ss. v. s. ss. ss.				
COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a ORGANIZATION'S NAMECOMERICA BANK 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	INDIVIDUAL'S FIRST PERSONAL NAME				
COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a ORGANIZATION'S NAMECOMERICA BANK 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	INDIVIDUAL'S ADDITIONAL NAME/SABILITAL'S				
COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral Indicate collateral Indicate collateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a ORGANIZATION'S NAME COMERICA BANK PhinDividual's Surname Additional Name(s)/INITIAL(s) Suffix 0. OPTIONAL FILER REFERENCE DATA:97414 - P.IP SERVICES INC	MOINIONE S ADDITIONAL NAME (S)/MITTAL(S)				SUFFIX
Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) if this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME COMERICA BANK 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 0. OPTIONAL FILER REFERENCE DATA:97414 - P.IP SERVICES INC	7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a ORGANIZATION'S NAME COMERICA BANK 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX D. OPTIONAL FILER REFERENCE DATA:97414 - P.IP SERVICES INC					
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a ORGANIZATION'S NAME COMERICA BANK 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 0. OPTIONAL FILER REFERENCE DATA:97414 - P.IP SERVICES INC		ADD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN collateral
and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME COMERICA BANK 9b. INDIVIDUAL'S SURNAME O. OPTIONAL FILER REFERENCE DATA:97414 - P.IP SERVICES INC	Indicate collateral:				
and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME COMERICA BANK 9b. INDIVIDUAL'S SURNAME O. OPTIONAL FILER REFERENCE DATA:97414 - P.IP SERVICES INC					
and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME COMERICA BANK 9b. INDIVIDUAL'S SURNAME O. OPTIONAL FILER REFERENCE DATA:97414 - P.IP SERVICES INC					
and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME COMERICA BANK 9b. INDIVIDUAL'S SURNAME O. OPTIONAL FILER REFERENCE DATA:97414 - P.IP SERVICES INC					
and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME COMERICA BANK 9b. INDIVIDUAL'S SURNAME O. OPTIONAL FILER REFERENCE DATA:97414 - P.IP SERVICES INC					
and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME COMERICA BANK 9b. INDIVIDUAL'S SURNAME O. OPTIONAL FILER REFERENCE DATA:97414 - P.IP SERVICES INC	. NAME OF SECURED PARTY OF RECORD AUTHORIZING	THIS AMENDMENT: P	ovide only one name (9a or 9b) (name of Assignor, if this is an Assignor	ent)
96. INDIVIDUAL'S SURNAME SUPPLIANCE ADDITIONAL NAME(S)/INITIAL(S) SUFFIX O. OPTIONAL FILER REFERENCE DATA:97414 - P.IP SERVICES INC	If this is an Amendment authorized by a DEBTOR, check here an				
96. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX O OPTIONAL FILER REFERENCE DATA:97414 - P.IP SERVICES INC	S. S				
0. OPTIONAL FILER REFERENCE DATA:97414 - PJP SERVICES INC.	96. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
0. OPTIONAL FILER REFERENCE DATA:97414 - PJP SERVICES INC.		1		i	1
101 001 701					