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UCC FINANCING STATEMENT AME	ENDMENT	-					
FOLLOWINSTRUCTIONS			_				
A NAME & PHONE OF CONTACT AT FILER (optional)  Corporation Service Company 1-800-	858-5294	$\alpha$					
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-6  B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address  109063587 - 358660 Corporation Service Company 801 Adlai Stevenson Days Springfield, IL 62703	:	CO.					
C. SEND ACKNOWLEDGMENT TO: (Name and Address	<u> نج۲/۱۲</u>						
109063587 - 358660	<b>J</b>						
Corporation Service Company							
801 Adlai Stevenson Drita							
Springfield, IL 62703 1	Filed In: Rho	de Island (S.O.S.)					
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1a. INITIAL FINANCING STATEMENT FILE NUMBER 201109713640 03/28/2011		1	b. This FINANCING STATE (or recorded) in the REAI	L ESTATE I	RECORDS	•	•
2. TERMINATION: Effectiveness of the Financing Stateme	ent identified above	is terminated w	Filer: <u>attach</u> Amendment Ad				
Statement Statement	Citt Indianien and As	terminated W					
ASSIGNMENT (full or partial): Provide name of Assigner For partial assignment, complete items 7 and 9 and also in			Assignee in item 7c and name	of Assignor	in item 9		
4. CONTINUATION: Effectiveness of the Financing States continued for the additional period provided by applicable		ve with respect	to the security interest(s) of Sec	cured Party	authorizing	this Continuatio	n Statement is
5. PARTY INFORMATION CHANGE:			<del>.</del>				
Check one of these two boxes:	AND Check one of			na: Campia	to itam	DELETE some	City and
This Change affects Debtor or Secured Party of record	item 6a d	E name and/or ad or 6b; and item 7:		ne: Comple , <u>and</u> item 7		to be deleted in it	Give record name em 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party	v Information Change						
68 ORGANIZATION'S NAMENAD CONTRACTOR		e - provide only <u>o</u>	ne name (6a or 6b)				
6a. ORGANIZATION'S NAMEM2 COMPANIES LL		e - provide only <u>o</u>	ne name (6a or 6b)	<del></del>			
6a. ORGANIZATION'S NAMEM2 COMPANIES LL.  OR 6b. INDIVIDUAL'S SURNAME	.C	FIRST PERSON		ADDITIO	NAL NAME(	S)/INITIAL(S)	SUFFIX
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