UCC FINANCING STATEMENT AMENDME	ENT				
FOLLOW INSTRUCTIONS	-14 1				
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) 112676267 - 372200 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In	o side di di]			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	~ C _{O//}	-			
112676267 - 372200	$S_{O, \infty} = -1$				
Corporation Service Company	J				
801 Adlai Stevenson Drive Springfield, IL 62703 Filed In	. Dhada laland				
Springheid, in 22,422	(S.O.S.)				
7111.				R FILING OFFICE USE	
1a, INITIAL FINANCING STATEMENT FILE NUMBER 201110202230 08/05/2011		(or recorded) in the REA	L ESTATE	ENDMENT is to be filed [for RECORDS rm UCC3Ad) <u>and</u> provide Debt	•
2. TERMINATION: Effectiveness of the Financing Statement identified	above is terminated w				
Statement					
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a For partial assignment, complete items 7 and 9 <u>and</u> also indicate affect			of Assigno	r in item 9	
CONTINUATION: Effectiveness of the Financing Statement identifier continued for the additional period provided by applicable law	ed above with respect	to the security interest(s) of Se	cured Party	authorizing this Continuati	on Statement is
5. PARTY INFORMATION CHANGE:		· · · · · ·			
Check bile of these two boxes.	k <u>one</u> of these three bo :HANGE name and/or <u>a</u>	kddress: Complete ADD na	me: Compl		Give record name
This Change affects Debtor or Secured Party of record its 6. CURRENT RECORD INFORMATION: Complete for Party Information C	em 6a or 6b; <u>and</u> item 7 Change - provide only (o, <u>and</u> item 7	to be deleted in	item 6a or 6b
6a ORGANIZATION'S NAMEOTO PROPERTIES, LLC	,				
OR 6b. INDIVIDUAL'S SURNAME	UAL'S SURNAME FIRST PERSONAL NAME ADD				SUFFIX
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			INAL NAME(S)/INITIAL(S)	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Info	ormation Change - provide o	only one name (7a or 7b) (use exact, full	name; do not o	mit, modify, or abbreviate any part o	of the Debtor's name)
7a. ORGANIZATION'S NAME					
OR 7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
	Low		LOTATE	IDOCTAL CODE	COUNTRY
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	USA
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE (covered collateral	ASSIGN collateral
Indicate collateral:	71DD conditional [100/014 bollatoral
 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS if this is an Amendment authorized by a DEBTOR, check here 	S AMENDMENT: Pi ide name of authorizin		(name of As	signor, if this is an Assignme	ent)
9a. ORGANIZATION'S NAMECItizens Bank, N.A. Formerly					
OR 95. INDIVIDUAL'S SURNAME	IFIRST PERSON	AL NAMF	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
STATE OF STA					
10. OPTIONAL FILER REFERENCE DATA: Debtor: OTO Proper	tion LLC		-		