UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS			
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294	7		
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	1		
114056287 - 358660   Corporation Service Company   8974193246 CSCINTO.COM   Springfield			
	<del>,</del>	FOR FILING OFFICE USE	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 201110026610 06/14/2011	(or recorded) in the REAL ESTA	Ib. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13	
2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated Statement	with respect to the security interest(s) o	f Secured Party authorizing this	Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address For partial assignment, complete items 7 and 9 and also indicate affected collateral in item.		gnor in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respective continued for the additional period provided by applicable law	ct to the security interest(s) of Secured F	Party authorizing this Continuati	on Statement is
5. PARTY INFORMATION CHANGE:			
Check one of these two boxes:  This Change affects Debtor or Secured Party of record CHANGE name and/or mitter 6a or 6b; and item	address: CompleteADD name: Co	omplete item DELETE name: em 7c to be deleted in	Give record name item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only 6a. ORGANIZATION'S NAMEJACOB TALBOT, INC.	y one name (6a or 6b)	<u>-</u>	
OR 6b. INDIVIDUAL'S SURNAME FIRST PERSO	NAL NAME ADD	ITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide	e only <u>one</u> name (7a or 7b) (use exact, full name; do	not omit, 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 FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	ISTA	TE IPOSTAL CODE	
	STAT	TE POSTAL CODE	SUFFIX COUNTRY USA
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			COUNTRY
7c. MAILING ADDRESS  CITY  8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral			COUNTRY
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  7c. MAILING ADDRESS  CITY  8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral Indicate collateral:  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:	DELETE collateral RESTA	TE covered collateral	COUNTRY USA ASSIGN collateral
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  7c. MAILING ADDRESS  CITY  8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral	DELETE collateral RESTA  Provide only one name (9a or 9b) (name of the policy of the p	TE covered collateral	COUNTRY USA ASSIGN collateral
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  7c. MAILING ADDRESS  CITY  8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral Indicate collateral:  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: If this is an Amendment authorized by a DEBTOR, check here and provide name of authorized.	Provide only one name (9a or 9b) (name only Debtor	TE covered collateral	COUNTRY USA ASSIGN collateral