,					
UCC FINANCING STATEMENT AMENDMEN FOLLOW INSTRUCTIONS	IT				
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294					
Corporation Service Company 1-800-858-5294 B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 1213 50479 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Ri	'n				
SPRFiling@cscinfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)	<u>70.</u>				
T1213 50479	\neg				
Corporation Service Company	ı				
801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: R	hode Island				
Filling Filling	(S.O.S.)				
1a. INITIAL FINANCING STATEMENT FILE NUMBER	<u> </u>			R FILING OFFICE USE	
693689 03/19/1999		1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCCSAd) and provide Debtor's name in item 13			
TERMINATION: Effectiveness of the Financing Statement identified abo Statement	ve is terminated w	th respect to the security interes	st(s) of Se	cured Party authorizing 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.		Assignee in item 7c <u>and</u> name c	of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law	bove with respect	to the security interest(s) of Sec	ured Party	authorizing this Continuation	on Statement is
5. PARTY INFORMATION CHANGE:					
Check one of these two boxes.	<u>ie</u> of these three bo NGE name and/or ad 6a or 6b; <u>and</u> item 7:	dress: CompleteADD nan	ne: Comple and item 7		Give record name
This Change affects Debtor or Secured Party of record item 6. CURRENT RECORD INFORMATION: Complete for Party Information Change affects of the complete for the complete			and item /	c to be deleted in	terii 6a bi 6b
6a ORGANIZATION'S NAMERuss' Ocean State, Inc.					
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
TO COMPANY OF A SPECIAL PROPERTY OF A SPECIA		7 7111	<u> </u>		44 · Debted
 CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informa 7a. ORGANIZATION'S NAMERUSS' Ocean State, Inc. 	ation Change - provide o	ny <u>one</u> name (/a or /b) (use exact, full na	ime, do not a	пії, пюдпу, от аввлечіате ату рат о	r the Debtor's name)
OR 75. INDIVIDUAL'S SURNAME					
75. INDIVIDUAL S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAMÉ					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
, we will be a second of the s					
7c. MAILING ADDRESS 35 Albany Road	CITY Warwick		RI	POSTAL CODE 02888	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: ADI	D collateral	DELETE collateral F	RESTATE C	overed collateral	ASSIGN collateral
indicate collateral:					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A			name of As	signor, if this is an Assignme	ent)
If this is an Amendment authorized by a DEBTOR, check here and provide and provide and ORGANIZATION'S NAMEHarley-Davidson Credit Corp.	name of authorizing	Debtor			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor: Russ' Ocean S	State, Inc.				1213 50479