UCC FINANCING STATEMENT AMENDM FOLLOW INSTRUCTIONS	IENT				
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-52	94	7			
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com  C. SEND ACKNOWLEDGMENT TO: (Name and Address)  1263 46887  Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703  Filed	COLL.				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	Ö				
1263 46887					
Corporation Service Company	·				
801 Adlai Stevenson Drive	In: Rhode Island				
Springing in the service	(S.O.S.)				
<u>.                                    </u>		<del></del>	*****	R FILING OFFICE USE	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 011019 06/19/2002		(or recorded) in the R	EAL ESTATE	ENDMENT is to be filed [for RECORDS rm UCC3Ad) <u>and</u> provide Debt	
TERMINATION: Effectiveness of the Financing Statement identifies     Statement	ed above is terminated	with respect to the security in	terest(s) of Se	cured Party authorizing this	Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item is For partial assignment, complete items 7 and 9 and also indicate affective.			me of Assignor	in item 9	
CONTINUATION: Effectiveness of the Financing Statement identical continued for the additional period provided by applicable law	ified above with respec	t to the security interest(s) of	Secured Party	authorizing this Continuati	on Statement is
5. PARTY INFORMATION CHANGE:					
Check <u>one</u> of these two boxes:  AND Check	eck <u>one</u> of these three b , CHANGE name and/or		name: Comple	te item DELETE name:	Give record name
This Change affects Debtor or Secured Party of record	item 6a or 6b; <u>and</u> item	7a or 7b <u>and</u> item 7c 7a o	r 7b, <u>and</u> item 7		
<ol> <li>CURRENT RECORD INFORMATION: Complete for Party Information         8a. ORGANIZATION'S NAMESitecon Corp., Inc.     </li> </ol>	n Change - provide only	one name (6a or 6b)		<u></u>	
Onecon Corp., inc.					
6b. INDIVIDUAL'S SURNAME	FIRST PERSOI	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party	Information Change - provide	only <u>one</u> name (7a or 7b) (use exact, 1	full name; do not or	nit, modify, or abbreviate any part of	of the Debtor's name)
7a. ORGANIZATION'S NAME					
OR 75. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME		,			
					louren
individual's additional name(s)/initial(s)					SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
					USA
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE C	overed collateral	ASSIGN collateral
Indicate collateral:					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING TH			b) (name of As	signor, if this is an Assignme	ent)
If this is an Amendment authorized by a DEBTOR, check here and pr 	ovide name of authorizii v known as RB	•			
	,	2 3.02010, 1475.			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
L 10. OPTIONAL FILER REFERENCE DATA Debtor: Sitecon Co	orp., Inc.				4000 1005
2020.00001100	- F - , - · · · - ·				1263 46887