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			(or recorded) in the REA	L ESTATE	RECORDS	-
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				of Assignor	in item 9	
				cured Party	authorizing this Continuation	on Statement is
PARTY INFORMATION CHANGE:						
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	item 6a or	6b; <u>and</u> item	7a or 7b <u>and</u> item 7c7a or 7b			
	tion Change	provide only	one name (6a or 6b)			
6b. INDIVIDUAL'S SURNAME	FI	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
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	any information (narige - provide	only <u>one</u> name (/a or /b) (use exact, null n	ame, do not o	mit, modily, or abbreviate any part or	(ile Deptoi 2 litalile)
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	NAME & PHONE OF CONTACT AT FILER (optional) NICK Barzellone 405-236-0003 E-MAIL CONTACT AT FILER (optional) SEND ACKNOWLEDGMENT TO: (Name and Address) MCCoy & Orta, P.C. 100 North Broadway, 26th Floor Oklahorna City, OK 73102 NITIAL FINANCING STATEMENT FILE NUMBER 1718360440 filed 7/26/17 TERMINATION: Effectiveness of the Financing Statement ident Statement ASSIGNMENT Do partial: Provide name of Assignee in Ite For partial assignment, complete items 7 and 9 and also indicate CONTINUATION: Effectiveness of the Financing Statement ide continued for the additional period provided by applicable law PARTY INFORMATION CHANGE: 100 PARTY INFORMATION CHANGE: 101 Secured Party of record 101 URRENT RECORD INFORMATION: Complete for Party Informs 102 Ga. ORGANIZATION'S NAME 103 PARTY INFORMATION TRUST, NATIONAL ASSOC 104 TRUST, NATIONAL ASSOC 105 INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME	NAME & PHONE OF CONTACT AT FILER (optional) NICK BARZEILONE 405-236-0003 E-MAIL CONTACT AT FILER (optional) SEND ACKNOWLEDGMENT TO: (Name and Address) MCCOY & Orta, P.C. 100 North Broadway, 26th Floor Oklahorna City, OK 73102 NITIAL FINANCING STATEMENT FILE NUMBER 1718360440 filed 7/26/17 TERMINATION: Effectiveness of the Financing Statement identified above is Statement ASSIGNMENT Dor partial): Provide name of Assignee in Item 7a or 7b, g For partial assignment, complete items 7 and 9 and also indicate affected collar continued for the additional period provided by applicable law PARTY INFORMATION CHANGE: Debtor or Secured Party of record CHANGE is Change affects Debtor or Secured Party of record item 6a or URRENT RECORD INFORMATION: Complete for Party Information Change 6a. ORGANIZATION'S NAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME WILMINGTON TRUST, NATIONAL ASSOCIATION, 7b. INDIVIDUAL'S FIRST PERSONAL NAME	LOWINSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional) NICK BARZEllone 405-236-0003 E-MAIL CONTACT AT FILER (optional) SEND ACKNOWLEDGMENT TO: (Name and Address) MCCoy & Orta, P.C. 100 North Broadway, 26th Floor Oklahorna City, OK 73102 INTIAL FINANCING STATEMENT FILE NUMBER 1718360440 filed 7/26/17 TERMINATION: Effectiveness of the Financing Statement identified above is terminated w statement ASSIGNMENT (D) partial): Provide name of Assignee in Item 7a or 7b, and address or For partial assignment, complete Items 7 and 9 and also indicate affected collateral in item 6 or partial assignment, complete items 7 and 9 and also indicate affected collateral in item 6 or Continued for the additional period provided by applicable law PARTY INFORMATION: Effectiveness of the Financing Statement identified above with respect continued for the additional period provided by applicable law PARTY INFORMATION CHANGE: INEX 200 of these two boxes: INCHANGE name and/or a litem 6a or 6b; and item IURRENT RECORD INFORMATION: Complete for Party Information Change - provide only 6a. ORGANIZATION'S NAME HANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only 7a. 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PADD name: Complete for Party Information Change - provide only gap name (7s or 7b) (use exact, bill name; do not or 7s ORGANIZATION'S NAME WILLMINGTON TRUST, NATIONAL ASSOCIATION, AS TRUSTEE* To INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME	LOW INSTRUCTIONS IAME & PHONE OF CONTACT AT FILER (optional) INC Barzellone 405-236-0003 I-MAIL CONTACT AT FILER (optional) SEND ACKNOWLEDGMENT TO: (Name and Address) MCCOy & Orta, P.C. 100 North Broadway, 26th Floor Oklahorna City, OK 73102 THE ABOVE SPACE IS FOR FILING OFFICE USE: (or recorded) in the REAL ESTATE RECORDS Filer adjust Amendment Address Amendment (Fem Uccase) and provide Date. TRINIAL FINANCING STATEMENT FILE NUMBER 11. This FINANCING STATEMENT AMENOMENT is to be filled [for (or recorded)) in the REAL ESTATE RECORDS Filer adjust Amendment Am

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 201718360440 filed 7/26/17 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 128, ORGANIZATION'S NAME FEDERAL HOME LOAN MORTGAGE CORPORATION OR 12b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filling offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit 13a. ORGANIZATION'S NAME SMC TERRACES AT CRANSTON LIMITED PARTNERSHIP OR 13b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): 15. This FINANCING STATEMENT AMENDMENT: 17. Description of real estate: covers timber to be cut covers as-extracted collateral is filed as a fixture filing 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): 18. MISCELLANEOUS: