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LICC FINANCING STATEMENT						
UCC FINANCING STATEMENT FOI LOW INSTRUCTIONS	AMENDMENT					
A. NAME & PHONE OF CONTACT AT FILER (op Name: Wolters Kluwer Lien Solutions Phone		-662-4141				
B. F-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com			Ī			
C. SEND ACKNOWLEDGMENT TO: (Name and A	Address) 16804 - 16804-V	VELLS				
Lien Solutions	7829632	21				
P.O. Box 29071 Glendale, CA 91209-9071	RIRI					
		1				
File with: Secretary			<u> </u>		OR FILING OFFICE US	
201616674180 6/23/2016 SS RI	<del></del>		(or recorded) in the RE Filer attach Amendment A	AL ESTATE ødendum (Fo	: RECORDS rn UCC3Ad) a <u>nd</u> provide Debio	ys name in item 13
TERMINATION: Effectiveness of the Financing Statement	Statement identified above is te	minated with r	espect to the security interesti	s) of Securi	ed Party authorizing this Te	noiteaum
3 ASSIGNMENT (full or partial) Provide name of For partial assignment, complete items 7 and 9.	Assignee in item 7a or 7b, <u>and</u> and also indicate affected colla	address of Ass teral in item 8	ignee in item 7c and name of	Assignor in	item 9	
4 X CONTINUATION Effectiveness of the Financini continued for the additional period provided by a	g Statement identified above wit	th respect to th	s security interest(s) of Securi	ed Party aut	honzing this Continuation S	Statement is
5 PARTY INFORMATION CHANGE	ppication to				<u> </u>	
Check one of these two boxes  This Change affects Debtor or Secured Party	AND Check one of the CHANGE	name and/or ad	dress CompleteADD ru	me Comple		Give record name
6. CURRENT RECORD INFORMATION Complete for				and item 7	c [_] to be deleted in	item 63 or 60
64 ORGANIZATION'S NAME HEATHERWOOD RILLC						
OR 65 INDIVIDUAL'S SURNAME	FI	RST PERSONAL	NAME	АРЛПІС	NAL NAME(S)/INITIAL(S)	SUFFIX
7 CHANGED OR ADDED INFORMATION Competer for	Assignment or Purty Information Change	- provide unity on	n name (7a or 7b) (use exact, full num	e, do not pend	modify, or abbreviate any part of th	e Debtor's name)
79 ORGANIZATION'S NAME						
76 INDIVIDUAL'S SURNAME.						-
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ACOTIONAL NAME(SYNITIAL(S)			·			SUFFIX
7c MATING ADDRESS						
70 MALING ADDRESS	Į <sup>a</sup>	RIY		STATE	POSTAL CODE	COUNTRY
8 COLLATERAL CHANGE Also check one of	these four boxes ADD co	Hateral [	DELETE collateral	RESTATE	covered collateral	ASSIGN collateral
Indicate collateral.						
9. NAME OF SECURED PARTY OF RECORD	AUTHORIZING THIS AMENI	OMENT Prov	ide only one name (9a or 9b) (	name of As	signor, if this is an Assignme	ent)
If this is an Amendment authorized by a DEBTOR icho  9a ORGANIZATK)N/S NAME						-
SECRETARY OF U.S. DEPARTME	ENT OF HOUSING & U	IRBAN DE'				
						T
96 INDIVIDUAL'S SURNAME	FI	RST PERSONAL	NAME	ADDITIO	NAL NAME(S)INITIAL(S)	SUFFIX
90 INDIVIDUAL S SURNAME	Name. HEATHERWOOD	_	NAME	ADDITIO	NAL NAME(S)INITIAL(S)	SUFFIX

FOLLOW INSTRUCTIONS	IENT ADDEND	ŮМ			
11 INITIAL FINANCING STATEMENT FILE NUMBER, Same as item 1a 201616674180 6/23/2016 SS RI	on Amendment form				
12, NAME OF PARTY AUTHORIZING THIS AMENDMENT. Same as ite	em 9 on Amendment form				
120 ORGANIZATION'S NAME SECRETARY OF U.S. DEPARTMENT OF HOU	ISING & URBAN				
DEVELOPMENT	<del></del>				
OR 126 INDIVIDUAL'S SURNAME	<u>-</u>				
FIRST PERSONAL NAME	<del>.</del>				
ADDITIONAL NAME(SYNITIAL(S)	Ţ	OUFFIX	T		
13. Name of DEBTOR on related financing statement (Name of a current	L Debtor of record required	d for indexing (	ourposes only in som	PACE IS FOR FILING OFFICE to e fling offices - see Instruction its	
one Debtor name (13a or 13b) (use exact, full name, do not omit, mo	odify, or abbreviate any pa	ort of the Debto	or's name); see Instru	ctions if name does not fit	
134 ORGANIZATION'S NAVE. HEATHERWOOD RILLC					
OR 13b, INDIVIDUAL'S SURNAME	FIRST PERSON	NAL NAME		ADDITIONAL NAME(SYNITIAL(S)	SUFFIX
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral) Debtor Name and Address: HEATHERWOOD RI LL.C - 135 SOUTH ROAD , FARMING Secured Party Name and Address: SECRETARY OF U.S. DEPARTMENT OF HOUSING & UR WELLS FARGO BANK, NATIONAL ASSOCIATION - 2010  1) WELLS FARGO BANK, NATIONAL ASSOCIATION  15. This FINANCING STATEMENT AMENDMENT  Covers timber to be cut. Covers as-extracted collateral.	RBAN DEVELOPMEN CORPORATE RIDG	E, SUITE 10	VENTH STREET 000 , MCLEAN, V	, SW , WASHINGTON, DC	20410
16 Name and address of a RECORD OWNER of real estate described in (if Debtor does not have a record interest)	n item 17				
18. MISCELLANEOUS 78296321 RI-0 16804 - 16804 WELLS FARGO MU	SECRETARY OF U.S. DE	PARTMENT	File with Secretary of St.	ate, RI 750111284	