### UCC FINANCING STATEMENT

**FOLLOW INSTRUCTIONS**

<table>
<thead>
<tr>
<th>A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</th>
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<th>B. E-MAIL CONTACT AT FILER (optional)</th>
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<tr>
<th>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</th>
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</table>

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. **DEBTOR'S NAME**

   - Provide only **sec** Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name). If any part of the Individual Debtor's name will not fit in line 1a, leave all of item 1 blank, check here, and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

   - **ORGANIZATION'S NAME**
   - **INDIVIDUAL'S SURNAME**
   - **FIRST PERSONAL NAME**
   - **ADDITIONAL NAME(S)/INITIAL(S)**
   - **SUFFIX**

   - **MAILING ADDRESS**
   - **CITY**
   - **STATE**
   - **POSTAL CODE**
   - **COUNTRY**

2. **DEBTOR'S NAME**

   - Provide only **sec** Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name). If any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here, and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

   - **ORGANIZATION'S NAME**
   - **INDIVIDUAL'S SURNAME**
   - **FIRST PERSONAL NAME**
   - **ADDITIONAL NAME(S)/INITIAL(S)**
   - **SUFFIX**

   - **MAILING ADDRESS**
   - **CITY**
   - **STATE**
   - **POSTAL CODE**
   - **COUNTRY**

3. **SECURED PARTY'S NAME** (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY)

   - Provide only **sec** Secured Party name (3a or 3b)

   - **ORGANIZATION'S NAME**
   - **INDIVIDUAL'S SURNAME**
   - **FIRST PERSONAL NAME**
   - **ADDITIONAL NAME(S)/INITIAL(S)**
   - **SUFFIX**

   - **MAILING ADDRESS**
   - **CITY**
   - **STATE**
   - **POSTAL CODE**
   - **COUNTRY**

4. **COLLATERAL**

   - This financing statement covers the following collateral:

   - 5. Check **sec** if applicable and check **one** box: 
   - 6a. Check **sec** if applicable and check **one** box:
   - 6b. Check **sec** if applicable and check **one** box:
   - 7. ALTERNATIVE DESIGNATION (if applicable): 
   - 8. OPTIONAL FILER REFERENCE DATA:

*International Association of Commercial Administrators (IACA)*
UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO:  (Name and Address)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c. For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law
5. PARTY INFORMATION CHANGE: Check one of these two boxes: AND check one of these three boxes: 
   CHANGE name and/or address: Complete item 6a or 6b; Change name in item 7a or 7b. Also check one of these four boxes:
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)
   OR
   First PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
   OR
   Organization's Name

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)
6a. ORGANIZATION'S NAME
6b. INDIVIDUAL'S SURNAME
6c. ORGANIZATION'S NAME
6d. INDIVIDUAL'S SURNAME

7a. ORGANIZATION'S NAME
7b. INDIVIDUAL'S SURNAME
7c. MAILING ADDRESS
8. COLLATERAL CHANGE: Also check one of these four boxes: 
   ADD collateral 
   DELETE collateral 
   RESTATE covered collateral 
   ASSIGN collateral

9. NAME or SECURED PARTY or RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
   OR
   Debtor or Secured Party of record

10. OPTIONAL FILER REFERENCE DATA:

International Association of Commercial Administrators (IACA)