

UCC FINANCING STATEMENT AMENDMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

14. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)		
15. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)		
15a. ORGANIZATION'S NAME		
OR	15b. INDIVIDUAL'S LAST NAME	FIRST NAME
		MIDDLE NAME, SUFFIX
16. MISCELLANEOUS		

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

17. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> name (17a or 17b) - do not abbreviate or combine names				
17a. ORGANIZATION'S NAME				
OR	17b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME
				SUFFIX
17c. MAILING ADDRESS			CITY	STATE POSTAL CODE COUNTRY
17d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	17e. TYPE OF ORGANIZATION	17f. JURISDICTION OF ORGANIZATION	17g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

18. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> name (18a or 18b) - do not abbreviate or combine names				
18a. ORGANIZATION'S NAME				
OR	18b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME
				SUFFIX
18c. MAILING ADDRESS			CITY	STATE POSTAL CODE COUNTRY
18. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	18e. TYPE OF ORGANIZATION	18f. JURISDICTION OF ORGANIZATION	18g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

19. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> name (19a or 19b) - do not abbreviate or combine names				
19a. ORGANIZATION'S NAME				
OR	19b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME
				SUFFIX
19c. MAILING ADDRESS			CITY	STATE POSTAL CODE COUNTRY
19d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	19e. TYPE OF ORGANIZATION	19f. JURISDICTION OF ORGANIZATION	19g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

20. ADDITIONAL SECURED PARTY'S NAME (or Name of TOTAL ASSIGNEE) -insert only <u>one</u> name (20a or 20b)				
20a. ORGANIZATION'S NAME				
OR	20b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME
				SUFFIX
20c. MAILING ADDRESS			CITY	STATE POSTAL CODE COUNTRY

21. ADDITIONAL SECURED PARTY'S NAME (or Name of TOTAL ASSIGNEE) - insert only <u>one</u> name (21a or 21b)				
21 a. ORGANIZATION'S NAME				
OR	21 b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME
				SUFFIX
21c. MAILING ADDRESS			CITY	STATE POSTAL CODE COUNTRY