

**UNIFORM COMMERCIAL CODE — FINANCING STATEMENT CHANGE — FORM N-UCC-2**

This STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code

**IMPORTANT.** acct#0075424-625

Read instructions on back before filing out form. **145991**

Receipt No. \_\_\_\_\_

1. File No. of this Financing Statement	1A. Date of original Financing Statement	1B. Date of original Financing Statement	1C. Place of Filing Original Financing Statement
1223	AUG 3, 1988		Bureka County, NV
2. DEBTOR (As appears on Original Financing Statement) (Do NOT check) LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST)		2A. FEDERAL IDENTIFICATION NUMBER (FEDERAL TAX ID)	
2B. MAILING ADDRESS (As appears on Original Financing Statement)		2C. CITY, STATE	2D. ZIP CODE
1555 Shoreline Drive, Suite 320		Boise, ID	83707
3. ADDITIONAL DEBTOR (If Any) (Do NOT check) LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST)		3A. FEDERAL IDENTIFICATION NUMBER (FEDERAL TAX ID)	
3B. MAILING ADDRESS		3C. CITY, STATE	3D. ZIP CODE
4. ADDITIONAL DEBTOR (If Any) (Do NOT check) LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST)		4A. FEDERAL IDENTIFICATION NUMBER (FEDERAL TAX ID)	
4B. MAILING ADDRESS		4C. CITY, STATE	4D. ZIP CODE
5. SECURED PARTY NAME MAILING ADDRESS CITY STATE ZIP CODE		5A. FEDERAL IDENTIFICATION NUMBER (FEDERAL TAX ID OR BANK TRANSIT AND ABA NO)	
United States National Bank of Oregon 321 SW 6th Ave. Portland OR 97204		93-0571729	
6. ASSIGNEE OF SECURED PARTY (If Any) NAME MAILING ADDRESS CITY STATE ZIP CODE		6A. FEDERAL IDENTIFICATION NUMBER (FEDERAL TAX ID OR BANK TRANSIT AND ABA NO)	
United States National Bank of Oregon 555 SW Oak PL7 Portland OR 97204		93-0571729	
7. <input checked="" type="checkbox"/> CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, fixtures, or oil, gas or minerals check here ( ), and insert description of real property on which growing or to be grown or to which attached or to be attached or from which to be extracted in Item 8 below. If crops or fixtures, also insert name of record owner of real estate. Effective only if submitted within 6 months prior to expiration date.			
<input type="checkbox"/> RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 8 below. Release does not terminate debt.			
<input checked="" type="checkbox"/> ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all or part of the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 8 below.			
<input type="checkbox"/> TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above.			
<input type="checkbox"/> AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 8 below. (Signatures of Debtor(s) and Secured Party(ies) required on all amendments.)			

8. (Date) <u>July 23</u> 19 <u>93</u>	9. This Space for Use of Filing Offices: (Date, Time, File Number and Filing Office)
By _____ (SIGNATURE(S) OF DEBTOR(S)) (TITLE)	BOOK 249 PAGE OFFICIAL RECORDS RECORDED AT THE REQUEST OF United States Nat '93 JUL 23 P4:03
By <u>[Signature]</u> (SIGNATURE(S) OF SECURED PARTY(IES)) (TITLE)	
United States National Bank of Oregon (TYPE NAME)	
11. Return Copy to: NAME: United States National Bank of Oregon ADDRESS: 555 SW Oak PL7 CITY, STATE AND ZIP: Portland, OR 97204	10. BUREAU COUNTY, NEVADA M. REBAL PAT. RECORDER FILE NO. <b>145991</b> FEE \$/0

THIS SPACE FOR USE OF FILING OFFICE

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