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Recording requested by Internations (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER (potional) Diligenz, Inc. 1-800-858-5294 SEND ACKNOWLEDGMENT TO: (Name and Address) Diligenz, Inc. Filed In: Nevada Eureka THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE# 66767 Bk 307 Pg 530 04/04/1997 TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(a) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law ASSIGNMENT full or parielly: Give name of seagmee in item 7a or 7b and additions of assignee in item 7c. and also give name of assigner in fleem 9 AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor of Secured Party of Insense Nove Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law ASSIGNMENT full or parielly: Give name of seagmee in item 7a or 7b and additional period provided by applicable law ASSIGNMENT full or parielly: Give name of seagmee in item 7a or 7b and additional period provided by applicable law CHANGE INSENSE ASSIGNMENT full or parielly: Give name of seagmee in item 7a or 7b and additional period provided by applicable law CHANGE INSENSE ASSIGNMENT full or parielly: Give name of seagmee in item 7a or 7b and additional period provided by applicable law CHANGE INSENSE ASSIGNMENT full or parielly: Give name of seagmee in item 7a or 7b and additional period provided by applicable law ADDITIONAL STATE ASSIGNMENT full or parielly: Give name of seagmee in item 7a or 7b and additional period provided by applicable law ADDITIONAL STATE NAME FIRST NAME MIDDLE NAME SUFF To INDIVIDUAL'S LAST NAME FIRST NAME ADDITIONAL FORGANIZATION ALL DE, if any ADDITIONAL FORGANIZATION ALL DE, if any	الر				11/17/	2006 02.56 PM	_
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