		DOC # 0223781			
UCC FINANCING STATEMENT AMENDMEN	т	Recor	ding red		ord Pord
FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]	<u>'</u>	Mike	Eureka Rebal	a County - NV leati - Record	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	——————————————————————————————————————	RPTT:	60.00 -547 p	Page 1 Recorded E Page- 0172	of 1 By: FES
Timothy J. Cronin, Esq. Davis Graham & Stubbs LLP 1550 17th Street, Suite 500 Denver, Colorado 80202	l	0223	781		
		THE ABOVE SPA	CE IS FOR	FILING OFFICE USE	ONLY
1a, INITIAL FINANCING STATEMENT FILE # 0216751 (Book 512, Page 0175, Filed 02/04/20	11)		to be	FINANCING STATEMENT A filed [for record] (or record L ESTATE RECORDS.	
TERMINATION: Effectiveness of the Financing Statement identified above is     CONTINUATION: Effectiveness of the Financing Statement identified above					- 3
continued for the additional period provided by applicable law.	e with respect to accumy in	toresita) or me ocosies	1,0,000		
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a					
<ol> <li>AMENDMENT (PARTY INFORMATION): This Amendment affects Deb Also check one of the following three boxes and provide appropriate information in its</li> </ol>	otor <u>or</u> Secured Party of ems 6 and/or 7.	of record. Check only <u>on</u>	e of these tv	vo boxes.	
CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.	DELETE name: Give to be deleted in item 6	ecord name	ADD na	ame: Complete item 7a or 7b, : mplete items 7e-7g (if applical	and also item 7c;
In regards to changing the name address of a party.      CURRENT RECORD INFORMATION:	Lo be deleted in item o	g Ul Ob.	235000	Inplete terris re-rig (ir applical	ole).
6a, ORGANIZATION'S NAME					
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	IAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:		_	\.		
7a, ORGANIZATION'S NAME			$\overline{}$		
OR	/ /		2		
75. INDIVIDUAL'S LAST NAME	FIRST NAME	\ '	MIDDLE	NAME	SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
7d. SEEINSTRUCTIONS   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   ORGANIZATION   DEBTOR	7f, JURISDICTION OF OR	RGANIZATION	7g. ORG/	I ANIZATIONAL ID #, if any	 
8. AMENDMENT (COLLATERAL CHANGE); check only one box.		/	<u> </u>		•
Describe collateral deleted or added, or give entire restated collatera	al description, or describe	colfateral assigned.			
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME adds collateral or adds the authorizing Debtor, or if this is a Termination authorized.	· <u>-</u>	nor, if this is an Assignme and enter name of DEB			by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized  9a. ORGANIZATION'S NAME	· <u>-</u>				by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized	· <u>-</u>			rizing this Amendment.	by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized  9a. ORGANIZATION'S NAME  HSBC Bank USA, National Association  9b. INDIVIDUAL'S LAST NAME	by a Debtor, check here		TOR autho	rizing this Amendment.	
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized  9a. ORGANIZATION'S NAME  HSBC Bank USA, National Association	by a Debtor, check here	and enter name of DEB	TOR autho	rizing this Amendment.	