4:30 PM

		Rol	l 698 Image 3546	5-3547	
	C FINANCING STATEMENT AMENDMEN		ment 16692 Type NUC		
	LOW INSTRUCTIONS (front and back) CAREFULLY  NAME & PHONE OF CONTACT AT FILER [optional]	Date	6/04/2008 Time :	2:41 PM	
1	MONA CORDLE, 1-402-289-2551	Rec	Amt \$12.00		
3. 3	SEND ACKNOWLEDGMENT TO: (Name and Address)				
	AMERICAN INTERSTATE BANK		ICK F GILL, AUDITOR	AND DECODOR	
	3331 N 204TH STREET		BURY COUNTY IOWA	AND RECORDE	
1	₹ P.O. BOX 469	*			
	ELKHORN, NE 68022				
	1	ı			
	L	THE ABO	VE SPACE IS FOR FILING OFFICE	USEONLY	
	NITIAL FINANCING STATEMENT FILE #	225	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the		
	3562, FILED OCT. 7, 2003 IN ROLL 617, IMAGE 1 TERMINATION: Effectiveness of the Financing Statement identified above is		REAL ESTATE RECORDS.		
_	CONTINUATION: Effectiveness of the Financing Statement identified abort		· · · · · · · · · · · · · · · · · · ·		
_	continued for the additional period provided by applicable law.				
·	ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a				
	MENDMENT (PARTY INFORMATION): This Amendment affects De also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in it	- II	k only <u>one</u> of these two 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 record name to be deleted in item 6a or 6b.	ADD name: Complete item 7a also complete items 7e-7g (if a	or7b, and also item 7c;	
. 1	CURRENT RECORD INFORMATION:				
	8a. ORGANIZATION'S NAME				
R	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
. (	CHANGED (NEW) OR ADDED INFORMATION:				
	7a. ORGANIZATION'S NAME				
R	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
C.	MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY	
<del>d</del>	SEE INSTRUCTIONS ADD'L INFO RE 76. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if	any	
٠.	ORGANIZATION DEBTOR	11. JUNISSIC HOWARD ON ON ON ON ON ON	rg. ORGANIZATIONAL ID #, II		
	AMENDMENT (COLLATERAL CHANGE): check only one box.			NONE	
٠. ،	escribe collateral 🔲 deleted or 🔲 added, or give entire 🔲 restated collatera	al description, or describe collateral as	signed.		
	AME or SECURED DARRY				
, I	IAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMI dds collateral or adds the authorizing Debtor, or if this is a Termination authorized				
. 1	IAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMIdds collateral or adds the authorizing Debtor, or if this is a Termination authorized		ssignment). If this is an Amendment author		
). I	dds collateral or adds the authorizing Debtor, or if this is a Termination authorized		ssignment). If this is an Amendment author		

UC	C FINANCING STATE	MENT AMENDM	ENT ADDENDUM		
FOL	LOW INSTRUCTIONS (front and ba	ck) CAREFULLY			
11.	INITIAL FINANCING STATEMENT F	ILE # (same as item 1a on Ame	endment form)		
#8	562, FILED OCT. 7, 2003,	IN ROLL 617, IMAC	GE 1335		
12.	NAME OF PARTY AUTHORIZING 12a. ORGANIZATION'S NAME	THIS AMENDMENT (same as	item 9 on Amendment form)		
0.0	AMERICAN INTERSTATE BANK				
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX		

13. Use this space for additional information

DEBTOR: GORDON PLAZA, L.L.C.

CONTINUATION OF UCC ORIGINALLY FILED OCT. 7, 2003

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