	ICC FINANCING STATEMENT	AMENDMEN'	т	REC \$ ∐	<i>ن</i>	FILED NO.	005708 .PAGE 5708		
FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER (optional) Candace Imming 515-223-4511				AUD \$ R.M.F. \$ _	3	2002 NOV 20) PM 1: 47		
1	S. SEND ACKNOWLEDGMENT TO: (Name and Add lowa Business Growth Company 7043 Vista Drive	٦	COMPUTER		T RECO	MICKI UTSLER RECORDER MADISON COUNTY, IOWA			
1a	West Des Moines, IA 50266 INITIAL FINANCING STATEMENT FILE # File 253 Bk 4 Pg 27 July 14	e , 1999		THIS AE	1b.	E IS FOR FILING OFF This FINANCING STATE to be filed (for record) (or recal ESTATE RECORDS	MENT AMENDMENT is recorded) in the		
3.	X TERMINATION: Effectiveness of the Financing Sta	atement identified above is Statement identified above ote law.	with respect to security into	erest(s) of the Secured Pa	Secured Part	y authorizing this Terminat	ion Statement.		
5. AMENDMENT (PARTY INFORMATION). This Amendment affects Debtor or Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. DELETE name: Give record name to be deleted in item 6a or 6b. ADD name: Complete item 7a or 7b, and also to be deleted in item 6a or 6b. CURRENT RECORD INFORMATION: 6a ORGANIZATION'S NAME									
OR	Clark Industries, LTD. 6b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NA	AME	SUFFIX		
7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME									
OR 7b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX			
7c	MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY		
70	D. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR	PE OF ORGANIZATION	7F. JURISDICTION OF	ORGANIZATION	7g. ORGA	NIZATIONAL ID #, If any	NONE		
9	AMENDMENT (COLLATERAL CHANGE): che Describe collateral deleted or added, or give entire	restated collateral de	MENT (name of assignor, if t	his is an Assignment). If	this is an Ame	endment authorized by a D	ebtor which		
,	NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here— and enter name of DEBTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME								
ЭR	U.S. Small Business Administration 9b. INDIVIDUAL'S LAST NAME	·	FIRST NAME		MIDDLE NAM	E	SUFFIX		

10. OPTIONAL FILER REFERENCE DATA SBA Loan CDC 296 365 40 04

FILING OFFICE COPY— NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98) Anchor Commercial Services (916) 962-7500 FILING OFFICE COPY— NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98) Anchor Commercial Services (916) 962-7500 Citrus Heights, CA 95610

UCC FINANCING STAT FOLLOW INSTRUCTIONS (front and back) (MENT ADDENDUM	
11. INITIAL FINANCING STATEMENT FILE # FILE 253 Bk 4 Pg 27 12. NAME OF PARTY AUTHORIZING THIS A	wy 16, 1999		
12a. ORGANIZATION'S NAME U.S. Small Business Adn	ninistration		
OR 12b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX	
13. Use this space for additional information			THIS ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Lot One (1) of Bellamy Addition, Plat No. 1, to the City of Winterset, Madison County, Iowa