11	CC EINANCIN	IC STATEM	ENT AMENDME	NT					
	LLOW INSTRUCTIONS (I		I FI	Document 2005 2604					
_	NAME & PHONE OF CO			Book 2005 Page 2604 Type 17 001 Pages 2					
	Wendy Young				Date 6/09/2005 Time 12:16 PM Rec Amt \$12.00				
В.	SEND ACKNOWLED	OGMENT TO: (Nam	e and Address)		Nec Ant Wiz	లల			
	Jours Business Crouds Commons								
	lowa Business Growth Company						[CKI" UTSLER, COUNTY RECORDER		
	5409 NW 88th Street, Ste 100				MADISON IOWA				
	Johnston, IA 50131						60101	$\overline{\nu}$	
							COMPUTER RECORDED	VC	
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L	<u> </u>			THIS ABOVE SPACE IS ^L FOR FILING OFFICE USE ONLY					
	INITIAL FINANCING STA 6954 Bk4, Pg79	TEMENT FILE #	à.				s FINANCING STATEMEI a filed [for record] (or reco L ESTATE RECORDS.		
— 2 . [11/0/L	D	and the second contract of contract of					
2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.									
3. X CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.									
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.									
5. AMENDMENT (PARTY INFORMATION):This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes.									
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 in item 6a or 6b. ADD name: Complete item 7a or 7b, and also item 6a or 6b.									
6.	6. CURRENT RECORD INFORMATION:								
6a. ORGANIZATION'S NAME									
OR	Swackhammer, Inc.				Terpor NAME		MIDDLE NAME SUFFIX		
	6b. INDIVIDUAL'S LAST NAME			FIRST NAME	FIRST NAME		MIDDLE NAME		
7.	7. CHANGED (NEW) OR ADDED INFORMATION:								
7a. ORGANIZATION'S NAME									
or	ļ					1		1	
OI1	75. INDIVIDUAL'S LAST	NAME		FIRST NAME		MIDDLE NA	ME	SUFFIX	
7c k	AAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY	
70.1									
7D. 1	TAX ID #: SSN OR EIN	ADD'L INFO RE	7e. TYPE OF ORGANIZATION	7F. JURISDIC	TION OF ORGANIZATION	7g. ORGA	NIZATIONAL ID #, If any		
	ORGANIZATION DEBTOR					NONE			
8. A	MENDMENT (COL	LATERAL CHAN	IGE): check only one box.						
Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.									
9. 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									
OR S	imall Business A	dministration							
	, INDIVIDUAL'S LAST N	AME		FIRST NAME		MIDDLE NAME		SUFFIX	
									
10. OF	PTIONAL FILER REFE	HENCE DATA							

FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 6954 Bk4, Pg79 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Small Business Administration OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

13. Use this space for additional information

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