UCC FINANCING STATEMENT AMENDMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

19. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form							
20. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment for							
20.	20a. ORGANIZATION'S NAME						
OR	20b. INDIVIDUAL'S SURNAME						
	FIRST PERSONAL NAME						
	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX THE ABOV		THE ABOVE	SPACE I	S FOR FILING OFFICE L	ISE ONLY
21	ADDITIONAL DERTOR'S NAME: Brouide only one Debter name (21e or 2		t full nome: de n	ot omit modify or obl	proviete er	where of the Debter's name)	
21.	ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21a or 21b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) 21a. ORGANIZATION'S NAME						
OR	21b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	
210	MAILING ADDRESS	СІТҮ			STATE	POSTAL CODE	COUNTRY
22. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (22a or 22b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)							
	22a. ORGANIZATION'S NAME						
OR	22b. INDIVIDUAL'S SURNAME	FIRST PERS	SONAL NAME	AL NAME		ADDITIONAL NAME(S)/INITIAL(S)	
220	MAILING ADDRESS	СІТҮ		STATE	POSTAL CODE	COUNTRY	
23. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (23a or 23b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)							
20.	23a. ORGANIZATION'S NAME						
OR	23b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	
230	. MAILING ADDRESS	СІТҮ		STATE	POSTAL CODE	COUNTRY	
24							
24.	ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (24a or 24b) 24a. ORGANIZATION'S NAME						
OR	24b. INDIVIDUAL'S SURNAME	FIRST PERS	SONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
240	I MAILING ADDRESS	СІТҮ		STATE	POSTAL CODE	COUNTRY	
07						L	1
25.	. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (25a or 25b) 25a. ORGANIZATION'S NAME						
OR	25b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME			ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
250	MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
26	MISCELLANEOUS:	I					

Instructions for UCC Financing Statement Amendment Additional Party (Form UCC3AP)

Please type or laser-print this form. Be sure it is completely legible. Read and follow all Instructions; use of the correct name for the Debtor is crucial. Fill in form very carefully; mistakes may have important legal consequences. If you have questions, consult your attorney. The filing office cannot give legal advice.

Use this form (multiple copies if needed) to continue adding additional Debtor or Secured Party names as needed when filing a UCC Financing Statement Amendment (Form UCC3).

ITEM INSTRUCTIONS

- 19. **File Number.** Enter file number of initial financing statement as shown in item 1a of Amendment (Form UCC3) to which this Amendment Addendum relates.
- 20. Name of Authorizing Party. Enter information exactly as shown in item 9 on Amendment (Form UCC3).
- 21-23. Additional Debtor's name. If this Amendment Additional Party adds additional Debtors, complete items 21, 22, and 23 in accordance with Instruction 1 of Financing Statement (Form UCC1).
- 24-25. Additional Secured Party's name or Assignor Secured Party's name. If this Amendment Additional Party adds additional Secured Parties, complete items 24 and 25 in accordance with Instruction 3 of Financing Statement (Form UCC1). In the case of an assignment of the Secured Party's interest, filer may enter Secured Party and/or Assignor Secured Party's name and mailing address information in items 24 and 25.
- 26. **Miscellaneous.** Under certain circumstances, additional information not provided on the Financing Statement Amendment (Form UCC3) may be required. Also, some states have non-uniform requirements. Use this space or attach additional page(s) and incorporate by reference in item 26 (e.g., See Exhibit A) to provide such additional information or to comply with such requirements; otherwise, leave blank. Do not include social security numbers or other personally identifiable information.