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STATE OF OREGON
Corporation Division - UCC
Public Service Building
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(503) 986-2200 Facsimile (503) 373-1166

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UCC-3A STATEMENT OF TERMINATION, CONTINUATION, ASSIGNMENT, RELEASE, AMENDMENT PLEASE TYPE OR WRITE LEGIBLY. READ INSTRUCTIONS BEFORE FILLING OUT FORM.

years from the date of filing, unless extended for additional periods as provide this form, financing statement or security agreement may be filed as a financing of A. THIS STATEMENT REFERS TO ORIGINAL FINANCING STATEM	
No. 41330 Vol. MOZ Do 23000	This
B. TYPE OF AMENDMENT Date Filed 7/21/9	
	I griu biller information
TERMINATION. (NO FEE) The Secured party certifies that they no interest under the financing statement bearing the file number of CONTINUATION. Submitted within all process.	Industrial
CONTINUATION. Submitted within six months prior to expiration of	ate.
ASSIGNMENT. The Secured Party assigns to the Assignee whose is shown in SECTION E and bearing the file number shown in SE	CHON A. Francisco Code
RELEASE. RELEASE DOES NOT TERMINATE DEBT. From the in the financing statement bearing the file number shown in Secured Party releases the following: (describe in SECTION G.).	
Choose one: Release of all Collateral Par	tial Release
AMENDMENT. Financing statement bearing file number shows amended as described in SECTION G. Signature of Debtor cases.	n in SECTION A is required in most
C. DEBTOR NAME(S)	
GOLDEN BEAR ACQUISITION CORP.	
2.	
3.	
DEBTOR MAILING ADDRESS: 10100 Santa Monica Boulevard Suite 1470 Los Angeles, California 90007-4183	
D. SECURED PARTY(IES) NAME AND ADDRESS LaSelle National Bank, as Agent 135 South LaSalle Street Chicago, Illinois 60606	
Contact Name: Nancy Butler Phone No. 312/90	
E. ASSIGNEE(S) NAME AND ADDRESS (if any)	2-5384
Contact Name:Phone No.:	File with Klamath County, Oregon
F. SIGNATURES. In accordance with ORS Statutes, ALL SECURED 8	
GOLDEN BEAR OIL STECHALTIESTING: By: LASALLE NATIONAL BANK, AS AGENT	EASALLE NA TIONAL BANK TO A cont
By: 77 146	SY.GUI. DEN BEAR OIL SPECIAL TIES, INC.
Secured Party (195) Signature	Elebtor Signature(s) (if required)
RETURN COPY TO: (name and address). Please do not type or prin	t outside of bracketed area. OR, FAX COPY TO: (name and fax number).
NANCY BUTLER KATTEN MUCHIN & ZAVIS	Name:
525 WEST MONROE SUITE 1600	
CHICAGO, ILLINOIS 60661-3693 TATE OF OREGON: COUNTY OF KLAMATH: ss.	Fax Number:
iled for record at request ofLaSalle National Bank	
f July A.D., 19 98 at 2:10 o'clo	the 14th day
of Mortgages	ck P. M., and duly recorded in Vol, on Page 25251
EE \$5.00	Bernetha G. Letsch, County Clark
YJ: W	By Kathlun Koss