

UCC-3

STATE OF OREGON
 Corporation Division - UCC
 255 Capitol Street NE, Suite 151
 Salem, OR 97310-1327
 (503) 986-2200 Facsimile (503) 373-1166
<http://www.sos.state.or.us/corporate/corphp.htm>

Vol M99 Page 18473

Klamath-02

STATEMENT OF TERMINATION, CONTINUATION, ASSIGNMENT, RELEASE, AMENDMENT

PLEASE TYPE OR WRITE LEGIBLY. READ INSTRUCTIONS BEFORE FILLING OUT FORM.

This Financing Statement is presented to filing officer pursuant to the Uniform Commercial Code. This financing statement remains effective for a period of five years from the date of filing, unless extended for additional periods as provided for by ORS Chapter 79. A carbon, photographic or other reproduction of this form, financing statement or security agreement may be filed as a financing statement under ORS Chapter 79.

A. THIS STATEMENT REFERS TO ORIGINAL FINANCING STATEMENT

No. VOL M97 PAGE 5448 Date Filed: 02/02/1997

B. TYPE OF AMENDMENT

TERMINATION. (NO FEE) The Secured party certifies that they no longer claim interest under the financing statement bearing the file number shown in SECTION A.

CONTINUATION. Submitted within six months prior to expiration date.

ASSIGNMENT. The Secured Party assigns to the Assignee whose name and address is shown in SECTION E and bearing the file number shown in SECTION A.

Choose one: Full Assignment Partial Assignment

RELEASE. RELEASE DOES NOT TERMINATE DEBT. From the collateral described in the financing statement bearing the file number shown in SECTION A, the Secured Party releases the following: (describe in SECTION G.)

Choose one: Release of all Collateral Partial Release

AMENDMENT. Financing statement bearing file number shown in SECTION A is amended as described in SECTION G. **Signature of Debtor required in most cases.**

C. DEBTOR NAME(S)

1. BI-MART CORPORATION

2. _____

3. _____

DEBTOR MAILING ADDRESS:
 220 South Seneca
 EUGENE, OR 97402

D. SECURED PARTY(IES) NAME AND ADDRESS

BankAmerica Business Credit, Inc
 55 S. Lake Ave., Suite 900
 PASADENA, CA 91101

Contact Name: _____ Phone No.: _____

E. ASSIGNEE NAME AND ADDRESS (if any)

Bank of America NT&SA
 55 South Lake Avenue, Suite 900
 PASADENA, CA 91101

Contact Name: _____ Phone No.: _____

F. SIGNATURES. In accordance with ORS Statutes, ALL SECURED PARTIES must sign UCC-3 Filings. OR-Klamath County

By: BankAmerica Business Credit, Inc

By: BI-MART CORPORATION

By: [Signature] As Agent
 Secured Party(ies) Signature

By: [Signature]
 Debtor Signature(s) (if required)

RETURN ACKNOWLEDGEMENT LETTER TO: (Include name, address and identifier for the debtor listed above. Limit the identifier to eight characters. REFER TO INSTRUCTION, NUMBER 7.) Please do not type or print outside of bracketed area.

LEXIS DOCUMENT SERVICES INC
 PO BOX 2969
 SPRINGFIELD, IL 62708

FEEES

Make check for \$10.00 payable to "Corporation Division."
 No Fee for Termination.

NOTE: Filing fees may be paid with VISA or Mastercard. The card number and expiration date should be submitted on a separate sheet of paper for your protection.

DO NOT SUBMIT DUPLICATES OF THIS FORM AND OR ATTACHMENTS.

State of Oregon, County of Klamath
 Recorded 5/12/99, at 11:45 AM
 At the referenced page, Vol. M99
 Linda Smith, County Clerk

FILING OFFICER

CU403 Rev. 8/97

Fee \$ 5-
Linda Smith