				Vol	M03	Page030	064
UCC FINANCING STATEMENT AMENDMENT				State of Oregon, County of Klamat Recorded 01/16/2003 //:54a m Vol M03 Pg 030 GA 65			
OLLOW INSTRUCTION A. NAME & PHONE OF				Linda	Smith,	County Clerk # of Pgs 2	/
B. SEND ACKNOWLED	GMENT TO: (Name	and Address)					
CSC	-	ETURN TO***			•		
Sacram	ento, CA 950 P6-0000-743	Drive, Suite 100 833 -9					
L			4	THE ABOVE SPA	CE IS FOR	FILING OFFICE USE	ONLY
a. INITIAL FINANCING STA		20/1002			1b. This F	INANCING STATEMENT	AMENDMENT is
73585 M93	<u> </u>	29/1993 noting Statement identified above is	terminated with respect to	security interest(s) of the S	REAL	ESTATE RECORDS.	
. CONTINUATION:		nancing Statement identified abov					
	· · · · · · · · · · · · · · · · · · ·	of assignee in Item 7a or 7b and a	ddress of assignee in item	7c; and also give name of	assignor in ite	m 9.	
		This Amendment affects Deb					
	•	rovide appropriate information in its		E name: Cive mand asses		Olate No 7-	
name (if name change CURRENT RECORD IN 8a. ORGANIZATION'S) in item 7s or 7b and/or NFORMATION:	record name in item 6a or 6b; also r new address (if address change)	in item 7c. to be d	E name: Give record name eleted in Item 6a or 6b.	ikem 1	name: Complete item 7a 7c; also complete items 7d	or 70, and also 1-7g (if applicabl
Quality Comp							
100' INDIAIDOYE'S FYS!	NAME		FIRST NAME		MIDDLE NA	ME	SUFFIX
							1
. CHANGED (NEW) OR A	NODED INFORMATION	N:			<u> </u>	· · · · · · · · · · · · · · · · · · ·	
CHANGED (NEW) OR A		N:					
	NAME	N:	FIRST NAME		MIDDLE NA	ME	SUFFIX
7a. ORGANIZATION'S N	NAME	N:					
7a. ORGANIZATION'S N	NAME	N:	FIRST NAME			ME OSTAL CODE	SUFFIX
7a. ORGANIZATION'S N	NAME F NAME	N: D. TYPE OF ORGANIZATION		PRGANIZATION	STATE P		COUNTRY
7a. ORGANIZATION'S N 7b. INDIVIDUAL'S LAST c. MAILING ADDRESS	ADD'L INFO RE 70 ORGANIZATION DEBTOR ATERAL CHANGE):	B. TYPE OF ORGANIZATION	CITY 71. JURISDICTION OF C		STATE P	OSTAL CODE	COUNTRY
7a. ORGANIZATION'S N 7b. INDIVIDUAL'S LAST c. MAILING ADDRESS	ADD'L INFO RE 70 ORGANIZATION DEBTOR ATERAL CHANGE):	TYPE OF ORGANIZATION check only <u>one</u> box.	CITY 71. JURISDICTION OF C		STATE P	OSTAL CODE	COUNTRY
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7a. ORGANIZATION'S N 7b. INDIVIDUAL'S LAST c. MAILING ADDRESS AMENDMENT (COLLA Describe collateral del	ADD'L INFO RE 70 ORGANIZATION DEBTOR ATERAL CHANGE): ileted or added, or	TYPE OF ORGANIZATION check only <u>one</u> box.	CITY 71. JURISDICTION OF C	collateral assigned.	7g. ORGANI	OSTAL CODE IZATIONAL ID #, If any Amendment authorized by	COUNTRY
7a. ORGANIZATION'S N 7b. INDIVIDUAL'S LAST 7b. INDIVIDUAL'S LAST 7c. MAILING ADDRESS AMENDMENT (COLLA Describe collateral del NAME OF SECURED adds collateral or adds the 9e. ORGANIZATION'S N	ADD'L INFO RE TO ORGANIZATION DEBTOR ATERAL CHANGE): ileted or added, or authorizing Debtor, or it imme	check only <u>one</u> box. give entire restated collateral	CITY 71. JURISDICTION OF C	collateral assigned.	7g. ORGANI	OSTAL CODE IZATIONAL ID #, If any Amendment authorized by	COUNTRY
7a. ORGANIZATION'S N 7b. INDIVIDUAL'S LAST c. MAILING ADORESS AMENDMENT (COLLA Describe collateral del NAME OF SECURED adds collateral or adds the	ADD'LINFO RE TO ORGANIZATION DEBTOR ATERAL CHANGE): leted or added, or authorizing Debtor, or it immediately and immediately	check only <u>one</u> box. give entire restated collateral	CITY 71. JURISDICTION OF C	collateral assigned.	7g. ORGANI	OSTAL CODE IZATIONAL ID #, If any Amendment authorized by no this Amendment.	COUNTRY

UC	C FINANC	ING STAT	TEMENTAMENDME	ENT ADDENDUM
			d back) CAREFULLY	
11.	INITIAL FINANC	ING STATEME	NT FILE # (same as item 1a on Amer	ndment form)
73	585 M93	35071	12/29/1993	
12.	NAME OF PART 12a. ORGANIZAT Heller Fi	ION'S NAME	NG THIS AMENDMENT (same as i	tem 9 on Amendment form)
OR	12b. INDIVIDUAL		FIRST NAME	MIDDLE NAME, SUFFIX

13. Use this space for additional information

DEBTOR NAME

Quality Components, Inc. 3722 Century Drive Klamath Falls, OR 97601 USA

SECURED PARTY

Heller Financial, Inc. 500 West Monroe Street Chicago, IL 60661 USA

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

OR-Klamath County