UCC FINANCING STATE	NT	00082435201000042950020020				
FOLLOW INSTRUCTIONS (front and back) A, NAME & PHONE OF CONTACT AT FILER [option			04/08/2010 09:10):21 AM		Fee: \$42.00
Phone (80	00) 331-3282 Fax (818	8) 662-4141				
B. SEND ACKNOWLEDGEMENT TO: (Name and	Mailing Address) 16915 US BA	NK PORTLA				
CT Lien Solutions	227095	21				
P.O. Box 29071	ODOD					
Glendale, CA 91209-9071	OROR					
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L			THE ABO		FOR FILING OFFICE L	
a. INITIAL FINANCING STATEMENT FILE VOL M00 PAGE 33037 09/11/0				v to be	FINANÇING STATEMEI filed [for record] (or reco . ESTATE RECORDS.	NT AMENDMENT is orded) in the
	Financing Statement identified abov					
continued for the additional period provided		<u></u>				Statement is
. ASSIGNMENT (full or partial): Give no			signee in 7c; and also give Party of record. Check only			
i. AMENDMENT (PARTY INFORMATION): T Also check one of the following three box			•			
CHANGE name and/or address: Give curre name (if name change) in item 7a or 7b and	nt record name in item 6a or 6b; also	ogive new ┌── D	ELETÉ name: Give record na be deleted in item 6a or 6b.		DD name: Complete iter m 7c; also complete ite	
65. CURRENT RECORD INFORMATION: 64. ORGANIZATION'S NAME ISAKSON-STEEL & CO., LLP 65. INDIVIDUAL'S LAST NAME	COMPUTER & CPA CC	ONSULTING		MIDDLE NA	ME	SUFFIX
OU. INDIVIDUALS EACH NAME						
CHANGED (NEW) OR ADDED INFORMA 7a. ORGANIZATION'S NAME	TION:					,
75. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NA	ME	SUFFIX
c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
d. SEE INSTRUCTION ADD'L INFO RE ORGANIZATION DEBTOR	7e. TYPE OF ORGANIZATION	7f. JURISDICTION (DF ORGANIZATION	7g. ORGAN	ZATIONAL ID #, if any	NONE
. AMENDMENT (COLLATERAL CHANGE)		eral description, or de	escribe collateral assign	ed.		:
					."	
			<u>.</u> *			
				•		
	•					
NAME of SECURED PARTY of RECORD Adds collected or adds the authorizing Debter of						y a Debtor which

adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and entername of DEBTOR authorizing this Amendment.

9a. ORGANIZATION'S NAME
U.S. BANK NATIONAL ASSOCIATION

9b. INDIVIDUAL'S LAST NAME

| MIDDLE NAME | SUFFIX

10. OPTIONAL FILER REFERENCE DATA

22709521 Debtor Name: ISAKSON-STEEL & CO., LLP. COMPUTER & CPA CONSULTING 02-0013556749-83/13155 3000013155

FOLLOW INSTRUCTIONS (front and back) CAREFULLY							
11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)							
VO	L M00 PAGE 33037 09/11/0	0 CC OR Klamath					
12. NAME of PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)							
	12a. ORGANIZATION'S NAME U.S. BANK NATIONAL ASSOCIATION	М	•				
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
13.	Use this space for additional informa	ation					

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Description: NOT REQUIRED. PLEASE FILE.