NJC910857-KR

UCC FINANCING STATEMENT AMENDMENT

2011-009112 Klamath County, Oregon

00105731201100091120010014

## 08/08/2011 03:22:45 PM

Fee: \$37.00

	S (front and back) CAREFULLY			
A. NAME & PHONE OF C	CONTACT AT FILER [optional]			
SEND ACKNOWLEDG	GMENT TO: (Name and Address)			
		<b>-</b>		
	MUCHIN ROSENMAN LLP	<b>!</b> :		
2900 K STI	REET, NW			
SUITE 200				
	TON, DC 20007-5118			
ATTN: VI	RGINIA A. DAVIS, ESQ.			
INITIAL EINANGING STA	TEMENT EU E #	THE ABOVE	SPACE IS FOR FILING OFFICE U	
a. Initial financing statement file # 2009-007975; FILED: 6/9/2009; Microfilm Records of		ls of Klamath County OP	1b. This FINANCING STATEM to be filed [for record] (or n REAL ESTATE RECORDS	ecorded) in the
		ove is terminated with respect to security interest(s) of		
CONTINUATION:		above with respect to security interest(s) of the Sec		
ASSIGNMENT (full	or partial): Give name of assignee in item 7a or 7b a	and address of assignee in item 7c; and also give nam	ne of assignor in item 9.	
,	· · · · · · · · · · · · · · · · · · ·	Debtor or Secured Party of record. Check or	ly <u>one</u> of these two boxes,	
· · · · · ·	owing three boxes <u>and</u> provide appropriate information address: Please refer to the detailed instructions	n in items 6 and/or 7.  DELETE name: Give record name	ADD name: Complete item 7e	7h7-
in regards to changing t	he name/address of a party.	to be deleted in item 6a or 6b.	ADD name: Complete item 7a also complete items 7e-7q (if an	or / b, and also item / c oplicable).
CURRENT RECORD IN				
HSBC Bank USA, as Indenture Trustee for		Ine Registered Holders of Falcon 1	MIDDLE NAME	U-1 SUFFIX
OD. INDIVIDUAÇ S CASTINAME		TINOT HOME	INIBBLE NAME	30,712
R 75. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
Monjazeb		Arastou		
c. MAILING ADDRESS		CITY	STATE POSTAL CODE	COUNTRY
3817 NE 20th	LADDII INFO DE LA DIDE OF ODO ANIZATION	Bellevue	WA 98005	USA
. <u>seeinstructions</u> lot Applicable	ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR –	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID#, if s	any No
`—	ATERAL CHANGE): check only one box.	pa		
Describe collateral de	leted oradded, or give entirerestated coll	ateral description, or describe collateral assign	ed.	
		AMENDMENT (name of assignor, if this is an Assig		zed by a Debtor which
9a, ORGANIZATION'S N		ized by a Debtor, check here and enter name of I	ALD FOR authorizing this Amendment	
		he Registered Holders of Falcon F	lvanahisa I aan Toosa 100	Λ 1
96. INDIVIDUAL'S LAST		FIRST NAME	MIDDLE NAME	V-1 SUFFIX
				1

10, OPTIONAL FILER REFERENCE DATA