## UNOFFICIAL CO

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY

Doc#: 0432222181 Eugene "Gene" Moore Fee: \$26.50 Cook County Recorder of Deeds Date: 11/17/2004 10:42 AM Pg: 1 of 1

A. NAME & PHONE OF CONTACT AT FILER [optional]					_
Brandi Dominguez 949-858-0314					
3. SEND ACKNOWLEDGMENT TO: (Name and Address)					
_	<u> </u>				
National Capital Management, LLC	1				
22362 Gilberto Ste 140					
Rancho Santa Margarita, CA 92688					
Tunding Sames and A	1				
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		THE ABOVE SPAC	E IS FOR	FILING OFFICE USE	ONLY
			1b. This	INANCING STATEMENT	AMENDMENT is
ia. INITIAL FINANCING STATEMENT FILE #			REAL REAL	filed [for record] (or record ESTATE RECORDS.	ded) in the
0020502736 3527/0135 52 CQ1 2. TERMINATION: Effectiveness of the Financing Statement identified above	- terrainated with respect	to security interest(s) of the Se	cured Party	authorizing this Terminati	on Statement.
2. TERMINATION: Effectiveness of the Financing Statement identified above to	is terminated with respect	interests of the Conward D	erty suthor	izing this Continuation St	atement is
CONTINUATION: Effectiveness of the Finan ing statement identified abord continued for the additional period provided by and sale law.					
4. ASSIGNMENT (full or partial): Give name of assignee 1 ite 17. or 7b and	address of assignee in ite	n 7c; and also give name of as	ssignor in it	em 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects D	ebtor or Secured Pa	rty of record. Check only one	of these tv	vo boxes.	
Also check one of the following three boxes and provide appropriate info mation in	items 6 and/or 7.				
CHANGE name and/or address: Please refer to the detailed instructions	DELETE name: G	ve record name n 6a or 6b.	ADD na also col	ıme: Complete item 7a or 7t mplete items 7e-7g (if applic	able).
in regards to changing the name/address of a party.	10 De deleted in he	11 34 4 35			
CURRENT RECORD INFORMATION:     6a. ORGANIZATION'S NAME	7	<u> </u>			<del></del>
OA. ORGANIZATION O TO MILE					
OR 6b. INDIVIDUAL'S LAST NAME	FIRST I AME	FIRSTI AME		MIDDLE NAME	
OB. INDIVIDUAL S LAST INAME		0.			
			L		
7. CHANGED (NEW) OR ADDED INFORMATION:		<del></del>			
7a. ORGANIZATION'S NAME					
National Capital Management, LLC	IFIRST NAME		MIDDLE NAME		SUFFIX
76. INDIVIDUAL'S LAST NAME	FIRST WAVIE				ļ
			STATE	POSTAL CODE	COUNTRY
7c. MAILING ADDRESS	CITY	(0)			US
8245 Tournament Dr Ste 230	Memphis		TN	38125 ANIZATIONAL ID#, if any	
7d. SEE INSTRUCTIONS   ADD'L INFO RE   7e. TYPE OF ORGANIZATION	7f. JURISDICTION C	FORGANIZATION	/g. CRG	ANIZATIONAL ID #, II WII)	
ORGANIZATION DEBTOR LLC	TN		0.		NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			·		
Describe collateral deleted or added, or give entire restated collateral	eral description, or desc	ibe collateral assigned.			
Describe collateral Cacioned of Caconst of State Collateral Caconst of Cacons					
Owner's Name: Delgado, Julian				10-	
Original Filing Information: 0020502736 3527/0135	52 001			<b>6</b>	
TELL - 3 05/03/3003				e.g. (C. 4b4.1	14 of Castion
Lot 20 in Block 25 in Cobe and McKinnon's 59th Str	eet and Western	Avenue Subdivisio	n 1/4 01	the Southeast 1	4 of Section
13, Township 38 North, Range 13, East of the 3rd Pr	incipal Meridian	, in Cook County, I	llinois		
P.I.N. 19-13-414-040					
<b>2 (-1)</b>					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A	MENDMENT (name of	ssignor, if this is an Assignme	nt). If this is	s an Amendment authorize	ed by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authoriz	ed by a Debtor, check her	and enter name of DEB	TOR author	orizing this Amendment.	
9a. ORGANIZATION'S NAME					
i i					
CR St. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
10 OPTIONAL FILER REFERENCE DATA			· -		