

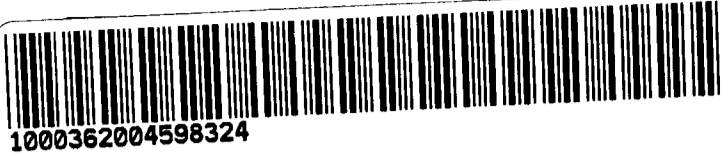
UCC APPROVAL SHEET

** KEEP WITH DOCUMENT **

TRANSACTION TYPE

FEE REMIT

___ UO - Original Financing Statement	\$25.00
___ UOA - Original Financing Statement with assignment	\$25.00
___ UOTU - Original Financing Statement Transmitting Utility	\$25.00
___ UMA - Amendment	\$25.00
___ UMDA - Amendment - Debtor Added	\$25.00
___ UMDC - Amendment - Debtor Name Change	\$25.00
___ UMDD - Amendment - Debtor Deleted	\$25.00
___ UMSA - Amendment - Secured Party Added	\$25.00
___ UMSC - Amendment - Secured Party Name Change	\$25.00
___ UMSD - Amendment - Secured Party Deleted	\$25.00
___ UMC - Amendment - Continuation	\$25.00
___ UMT - Amendment - Termination	\$25.00
___ UMZ - Amendment - Assignment	\$25.00
___ UMZP - Amendment - Partial Assignment	\$25.00
___ UMCS - Amendment - Correction Statement	\$25.00
___ UOMH - Manufactured Home - Original Financing Statement	\$25.00
___ UOPF - Public Finance - Original Financing Statement	\$25.00
___ Documents Nine (9) Pages or More	\$75.00
___ Certified Copies	
___ Plain Copies	
TOTAL FEES:	<u>2500</u>



RECORDED ON 03/04/2013 AT 11:04 AM
 IN THE FINANCING RECORDS OF THE MD. ST.
 DEPARTMENT OF ASSESSMENTS AND TAXATION.
 WO # 0004109468 ACK # 1000362004598324
 ORIGINAL FILE NUMBER: 0000000181467286
 PAGES: 0002

OTHER CHANGES:

Code _____

Attention: _____

Mail to Address: _____

NO FEE TRANSACTION TYPES

- ___ URC - Copies
- ___ UNCP - Void - Non-Payment
- ___ UCC - Cancellation
- ___ UCR - Reinstatement
- ___ UCO - Departmental Action
- ___ UCREF - Refund Recordation Tax
- ___ UCIS - Incorrect ID Number
- ___ XOVRU - UCC Overrides
- ___ UMFC - Filing Office Correction Statem.....

THE EMPIRE OF ATLANT AMEXEM GOVERNMENT T
 P. O. BOX 48324
 PHILADELPHIA PA 19144

Method of Payment:

Cash Check Credit Card

Number of Checks

Comments(s):

CUST ID: 0002892863
 WORK ORDER: 0004109443
 DATE: 03-18-2013 12:49 PM
 AMT. PAID: \$50.00

CUST ID: 0002892888
 WORK ORDER: 0004109468
 DATE: 03-18-2013 01:03 PM
 AMT. PAID: \$125.00

UCC FIN.

FOLLOW INSTRUCTIONS (front and back) of this form.

RECEIVED

2013 MAR -4 A 11:04

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

The Empire of Atlan Amexem Government Trust
P.O.Box 48324
Philadelphia, Pennsylvania 19144

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME
EMPEROR AND EMPRESS OF THE ATLAN AMEXEM TERRITORY

OR
 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
C/O P.O.BOX 48324 PHILADELPHIA PA (19144) usa

1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any
N/A **EMPIRE** **Empire of Atlan Amexem** **N/A** NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME
UNITED STATES INCORPORATED

OR
 2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
1600 PENNSYLVANIA AVENUE WASHINGTON DC 20220

2d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any
Distrcit of Columbia NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME

OR
 3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX
Bey Isra'el Aaliyah, Bey Isra'el Judah Imperial Majesty

3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
c/o Post Box 48324 Philadelphia Pa (19144)

4. This FINANCING STATEMENT covers the following collateral:

Imperial Majesty Emperor/King Judah Abraham Bey Isra'el and Empress of the Shaykamaxum Atlan Amexem Empire Al Moroc known as, (North America and outlining Islands) in public/trust capacity in the commercial chamber under necessity and ALL collateral, All Property and Land consisting of the historical record of the 100% Indigenous Blood Line from the Beginning to the time of King Iluda 5 B.C. to the present exhibiting as a matter of fact the right of Royal Title of Emperor/King and Empress, Shaykamaxum Nation Atlan Amexem Empire, Al Moroc Supported by financing statement numbers, 2013008824, 2013013532, 2013021867, 12-12-22-5350-2, 2012136626. We of Shaykamaxum Altan Amexem Empire, Al Moroc have reclaim the land located at, all Political Jurisdictions and Venues within the boundaries of the land now reclaimed under the jurisdiction of the Shaykamaxum Atlan Amexem Empire, shall be as follows, namely all land, ports, waterway point with in the coordinates. [United States] now Atlan Amexem Continent, NW. Longitude 38' 00' N Latitude 97' 00' W, and [Mexico] Longitude 23' 00' Latitude 102' W and [Canada] Longitude 60' 00' North Latitude 95' 00' West. This Maritime Commercial Lien is placed against all the responsible parties, Banks, Depositories, Corporations, Local State, Federal government Officials the collateral therein \$900,000,000,000,000.00 USD. Nine Hundred Trillion Dollars.

5. ALTERNATIVE DESIGNATION (if applicable): LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional) All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA