

UCC APPROVAL SHEET

**** EXPEDITED SERVICE ****

**** KEEP WITH DOCUMENT ****

TRANSACTION TYPE

FEE REMITTED

<input checked="" type="checkbox"/> Expedited Fee	\$50.00
<input type="checkbox"/> UO - Original Financing Statement	\$25.00
<input type="checkbox"/> UOA - Original Financing Statement With Assignment	\$25.00
<input type="checkbox"/> UOTU - Original Financing Statement Transmitting Utility	\$25.00
<input type="checkbox"/> UMA - Amendment	\$25.00
<input type="checkbox"/> UMDA - Amendment - Debtor Added	\$25.00
<input type="checkbox"/> UMDC - Amendment - Debtor Name Change	\$25.00
<input type="checkbox"/> UMDD - Amendment - Debtor Deleted	\$25.00
<input type="checkbox"/> UMSA - Amendment - Secured Party Added	\$25.00
<input type="checkbox"/> UMSC - Amendment - Secured Party Name Change	\$25.00
<input type="checkbox"/> UMSD - Amendment - Secured Party Deleted	\$25.00
<input type="checkbox"/> UMC - Amendment - Continuation	\$25.00
<input type="checkbox"/> UMT - Amendment - Termination	\$25.00
<input checked="" type="checkbox"/> UMZ - Amendment - Assignment	\$25.00
<input type="checkbox"/> UMZP - Amendment - Partial Assignment	\$25.00
<input type="checkbox"/> UMCS - Amendment - Correction Statement	\$25.00
<input type="checkbox"/> UOMH - Manufactured Home - Original Financing Statement	\$25.00
<input type="checkbox"/> UOPF - Public Finance - Original Financing Statement	\$25.00
<input checked="" type="checkbox"/> Documents Nine (9) Pages or More	\$75.00
<input type="checkbox"/> Certified Copies	
<input type="checkbox"/> Plain Copies	

TOTAL FEES: 186.⁰⁰



RECORDED ON 07/28/2011 AT 12:05 PM
IN THE FINANCING RECORDS OF THE MD. ST.
DEPARTMENT OF ASSESSMENTS AND TAXATION.
WO # 0003840099 ACK # 1000362002066696
ORIGINAL FILE NUMBER: 0000000181425776
PAGES: 0002

Other Change(s)

Code _____

THE UNITED STATES OF AMERICA TREASURY DE
CARMEN MILAGROS ORTIZ, USA
1 COURTHOUSE WAY
JOHN JOSEPH MOAKLEY COURTHOUSE
BOSTON MA 02210

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 Statement

METHOD OF PAYMENT

Cash Check _____ Credit Card _____

Number of Checks _____

COMMENT(S):

CERTIFIED
COPY MADE

Stamp from Office
 CUST ID: 0002623519
 WORK ORDER: 0003840099
 DATE: 07-28-2011 12:05 PM
 AMT. PAID: \$186.00

CUST ID: 0002623519
WORK ORDER: 0003840099
DATE: 07-28-2011 12:05 PM
AMT. PAID: \$186.00

RECEIVED

2011 JUL 28 P 12:05

DEPARTMENT
 ASSESSMENT
 & TAXATION

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

[The United States of America,
 Treasury -Department- Internal Re-Venue Service (IRS)]
 Att: Carmen Milagros Ortiz, USA
 1 Courthouse Way
 John Joseph Moakley Courthouse
 Boston, MA 02210

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #

181425776

1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS.

2. **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3. **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. **ASSIGNMENT (full or partial):** Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 8.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.

DELETE name: Give record name to be deleted in item 6a or 6b.

ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7e-7g (if applicable).

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME

OR 6b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME

U.S. TREASURY -DEPARTMENT- INTERNAL RE-VENUE SERVICE (IRS)

OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7c. MAILING ADDRESS

FRB-BOS (11 USC), 600 ATLANTIC AVENUE BOSTON MA 02106 u.s.a.

7d. SEE INSTRUCTIONS

14,300,000,000,000

ADD'L INFO RE ORGANIZATION DEBTOR

7e. TYPE OF ORGANIZATION a trustee (15 USC)

7f. JURISDICTION OF ORGANIZATION The United States Of America

7g. ORGANIZATIONAL ID #, if any AG 59880464 a

NONE

8. AMENDMENT (COLLATERAL CHANGE): check only one box.

Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

014,300,000,000,000.-
[014,300,000,000,000.-]

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.

9a. ORGANIZATION'S NAME

THE UNITED STATES DEPARTMENT OF THE TREASURY 1789

OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10. OPTIONAL FILER REFERENCE DATA