UCC FINANCING STATEMENT AMENDMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

19. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form				
20. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 20a. ORGANIZATION'S NAME				
Edd. GROWNE WINE				
OR 20b. INDIVIDUAL'S SURNAME				
EVENT DEPONIUM MANUE				
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
24 ADDITIONAL DEPTOPIS NAME, Durid of the Debugger	2045) (IS FOR FILING OFFICE	
21. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21a or 21a. ORGANIZATION'S NAME	r 21b) (use exact, full name; do r	not omit, modify, or appreviate a	iny part of the Deptor's name,	<u> </u>
OR ALL NAME OF THE PROPERTY OF	FIRST REPOSALL MANE		TARRITIONAL MANE (O. WALTER)	
21b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIC	DNAL NAME(S)/INITIAL(S)	SUFFIX
21c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
PEDTORIO				
22. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (22a or 22a. ORGANIZATION'S NAME	r 22b) (use exact, full name; do n	not omit, modify, or abbreviate a	iny part of the Debtor's name)	
OR	1	1		1
OR 22b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX
22c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
 ADDITIONAL DEBTOR'S NAME: Provide only <u>one</u> Debtor name (23a of 23a. ORGANIZATION'S NAME 	r 23b) (use exact, full name; do r	not omit, modify, or abbreviate a	iny part of the Debtor's name)	<u> </u>
OR COLUMN TO SUPPLANT				
23b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
23c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
24. ADDITIONAL SECURED PARTY'S NAME or ASSIGI	NOR SECURED PARTY	S NAME: Provide only one n	ame (24a or 24b)	
OR				
24b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX
24c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
25. ADDITIONAL SECURED PARTY'S NAME or ASSIGI	NOR SECURED PARTY	S NAME: Provide only one n	ame (25a or 25b)	
OR				
25b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX
25c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
26. MISCELLANEOUS:				

Instructions for UCC Financing Statement Amendment Additional Party (Form UCC3AP)

Please type or laser-print this form. Be sure it is completely legible. Read and follow all Instructions; use of the correct name for the Debtor is crucial. Fill in form very carefully; mistakes may have important legal consequences. If you have questions, consult your attorney. The filing office cannot give legal advice.

Use this form (multiple copies if needed) to continue adding additional Debtor or Secured Party names as needed when filing a UCC Financing Statement Amendment (Form UCC3).

ITEM INSTRUCTIONS

- 19. **File Number.** Enter file number of initial financing statement as shown in item 1a of Amendment (Form UCC3) to which this Amendment Addendum relates.
- 20. Name of Authorizing Party. Enter information exactly as shown in item 9 on Amendment (Form UCC3).
- 21-23. **Additional Debtor's name.** If this Amendment Additional Party adds additional Debtors, complete items 21, 22, and 23 in accordance with Instruction 1 of Financing Statement (Form UCC1).
- 24-25. Additional Secured Party's name or Assignor Secured Party's name. If this Amendment Additional Party adds additional Secured Parties, complete items 24 and 25 in accordance with Instruction 3 of Financing Statement (Form UCC1). In the case of an assignment of the Secured Party's interest, filer may enter Secured Party and/or Assignor Secured Party's name and mailing address information in items 24 and 25.
- 26. **Miscellaneous.** Under certain circumstances, additional information not provided on the Financing Statement Amendment (Form UCC3) may be required. Also, some states have non-uniform requirements. Use this space or attach additional page(s) and incorporate by reference in item 26 (e.g., See Exhibit A) to provide such additional information or to comply with such requirements; otherwise, leave blank. Do not include social security numbers or other personally identifiable information.