AFN #2008170368 Recorded 07/08/08 at 11:09 AM DocType: UCCT Filed by: SKAMANIA COUNTY TITLE COMPANY Page: 1 of 1 Auditor J. Michael Garvison Skamania County, UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER (optional) B, SEND ACKNOWLEDGMENT TO: (Name and Address) Cadwalader, Wickersham & Taft, LLP 227 West Trade Street, Suite 2400 Charlotte, North Carolina 28202 Attention: Richard Madden THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY This FINANCING STATEMENT AMENDMENT is INITIAL FINANCING STATEMENT FILE # to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. #2007165989 filed 05/03/07 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. 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 9. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects October of Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7e-7g (if applicable). 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. B. CURRENT RECORD INFORMATION 6a. ORGANIZATION'S NAME MIDDLE NAME SUFFIX OR 66. INDIVIDUAL'S LAST NAME FIRST NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7s. ORGANIZATION'S NAME OR 76. INDIVIOUAL'S LAST NAME SUFFIX FIRST NAME MIDDLE NAME COUNTRY STATE POSTAL CODE CITY 7c. MAILING ADDRESS ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR 7g, ORGANIZATIONAL ID #, if any 7f. JURISDICTION OF ORGANIZATION 7d SEEINSTRUCTIONS NONE 8. AMENDMENT (COLLATERAL CHANGE); check only one box. Describe collateral added, or give entire restated collateral description, or describe collateral assigned

NAME OF SECURED PARTY OF RECORD AUTHOR adds collateral or adds the authorizing Debtor, or if this is a Terr			
9a, ORGANIZATION'S NAME			,
Merrill Lynch Commercial Fina	FIRST NAME	MIDDLE NAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA File with Skamania County, State of Wash	nington	rnational Association of Commercial	Administrators (IAC)
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