STATE OF KANSAS - SEND THREE PARTS TO FILING OFFICER WITH ONE CARBON

Uniform Commercial Code - Statement of Continuation Release, Amendment, Etc. - Form UCC-2

1. Type form, 2. If space is inadequate continue on additional sheet, 3. Enclose filing fee,

4. Filings in the Secretary of State's Office must contain either the debtor's federal employer identification number or social security number. When the debtor is a sole proprietor, only the debtor's SSN is authorized to be filed.

				Prepaid account number	
Deptor (it individual, last name tirs NATURAL WAY NATURAL 820 MASSACHUSETTS LAWRENCE, KS 6604	L FIBER INC.	Debtor (if individual, la	ast name first) and ad	dress:	
FEIN 48-0932915 or SSN		FEIN	or SS	or SSN	
2. Secured Party and address (there (Type information inside gray)	may be more than one):			For filing officer	
9TH AND PO BOX	COUNTY BANK KENTUCKY 429 E KS 66044			POLIGLAS COUNTY 1998 JUL -2 RI SUE NEUCLA REGISTER OF D	
3. Assignee and address if applica	pie			9 015148	
4 This statement refers to Origin	al Financing Statement Number:	001845	Original filing date	7/25/1988 Filed with DG CO F	
	The original Financing Statemen above file number is still effective. The secured Party of record no le security interest under the Finance.	onger claims a	D. Assignment	The Secured Party of record has	
C. Release	bearing the above file number. From the Collateral described in Statement bearing the above file Secured Parry of record release below.	ile number, the	E. Amendment		
6. This area is for describing ch	anges.				
				6.00	
			Number of Ado	litional Sheets, if any.	
			DOUGLAS COUN	TY BANK	
			Lynn	M. Collier	
Sign (Necessary if any amendment of	ature of Debtor(5) henges the classification or the value of collat	eral)	Signature (s) of Secured Party (ies)	

Form UCC-2 Form approved by Kansas Secretary of State