

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.

Prepaid account number 8542

1. Debtor (if individual, last name first) and address:

Reed Medical Group, Chartered
 404 Maine, Suite 3
 Lawrence, Kansas 66044

Debtor (if individual, last name first) and address:

FEIN _____ or SSN _____

FEIN _____ or SSN _____

2. Secured Party and address (there may be more than one):
 (Type information inside gray area)

Mercantile Bank of Lawrence N.A.
 formerly known as
 The First National Bank of Lawrence
~~successor to:~~
~~Lawrence National Bank & Trust Co.~~
 P.O. Box 428
 Lawrence, Ks 66044

For filing officer

FILED
 DOUGLAS COUNTY KANSAS
 94 FEB 3 PM 1 45
 SUE REUSTIFTER
 REGISTER OF DEEDS

9008126

3. Assignee and address if applicable

4. This statement refers to Original Financing Statement Number: 1244

Original filing date 3-23-84 Filed with Dg. Co. KS

5. ☒ **A. Continuation** The original Financing Statement bearing the above file number is still effective.

☐ **D. Assignment**

The Secured Party of record has assigned the Secured Party's rights in the property described below under the Financing Statement bearing the above file number to the Assignee whose name and address are shown above.

☐ **B. Termination** The secured Party of record no longer claims a security interest under the Financing Statement bearing the above file number.

☐ **E. Amendment**

The Financing Statement bearing the above file number is amended as set forth below.

☐ **C. Release** From the Collateral described in the Financing Statement bearing the above file number, the Secured Party of record releases the collateral below.

6. This area is for describing changes.

Number of Additional Sheets, if any. _____

J. Rombough
 J. Rombough, CLA

Signature of Debtor(s)

Signature(s) of Secured Party (ies)

(Necessary if any amendment changes the classification or the value of collateral)

Form UCC- 2 Form approved by Kansas Secretary of State

ck
 \$6.00