FOLI A. N Di	C FINANCING STATEMENT AMENDMEN OW INSTRUCTIONS (front and back) CAREFULLY IMAGE & PHONE OF CONTACT AT FILER [optional] Iligenz, Inc. 1-800-858-5294 END ACKNOWLEDGMENT TO: (Name and Address) 22373570 Prepared by: Dilligenz, Inc. 6500 Harbour Heights Pkwy, Suite 400 Mukilteo, WA 98275 Filed In: Washington			t Cour ge 			5AM	
1a. II	NITIAL FINANCING STATEMENT FILE # 04/16/1999 0244 04/16/1999			4- 1-	FINANCING STATEM filed [for record] (or r			
-	TERMINATION: Effectiveness of the Financing Statement Identified above is	terminated with respect to	security interest(s) of the Se	REAL	LESTATE RECORDS	3		
3.	CONTINUATION: Effectiveness of the Financing Statement identified above 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 Debtor of 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.							
ŕ	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 and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party. ADD name: Complete item 7a or 7b, and also item 7c; also or 6b.							
6 . C	5. CURRENT RECORD INFORMATION:							
i	8a. ORGANIZATION'S NAME							
OR	5b. INDIVIDUAL'S LAST NAME	FIRST NAME	<u> </u>	MIDDLEN	AME		SUFFIX	
7 (CHANGED (NEW) OR ADDED INFORMATION:	A STATE OF THE STA	<u> </u>			_	,,,,,,	
	7a. ORGANIZATION'S NAME							
OR	BROWN & COLE STORES, LLC 76. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	NAME		SUFFIX	
	78. INDIVIDUAL S LAST IVANIL	1					·	
	MAILING ADDRESS	спү		STATE	POSTAL CODE 98227	_	COUNTRY	
	1331 Commercial PO BOX 9797	Bellingham	DO ANIZATION	WA	NIZATIONAL ID#, if	2nV	USA	
7d. ;	ADD'L INFO RE OF ORGANIZATION ORGANIZATION DEBTOR	WA	RGANIZATION	1 7	602 124 656		NONE	
Le	AMENDMENT (COLLATERAL CHANGE): check only one box. Rescribe collateral deleted or added, or give entire restated collateral gal: Section 19 Lots 1 and 2 township 35 AMENDMENT (COLLATERAL CHANGE): check only one box. Rescribe collateral restated collateral gal: section 19 Lots 1 and 2 township 35 AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMI RIGHT OF SECURED PARTY OF RECORD AUTHORIZING THIS AMI RIGHT OF SECURED PARTY OF RECORD AUTHORIZING THIS AMI RIGHT OF SECURED PARTY OF RECORD AUTHORIZING THIS AMI RIGHT OF SECURED PARTY OF RECORD AUTHORIZING THIS AMI RIGHT OF SECURED PARTY OF RECORD AUTHORIZING THIS AMI	ENDMENT (name of assig	nor, if this is an Assignmen). If this is OR author	an Amendment authorizing this Amendment	rized by.	a Debtor which	
•	9a, ORGANIZATION'S NAME		<u></u>		- A	7		
OF	General Electric Capital Business Asset Funding			\			TOUREN	
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	25"	SUFFIX	

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10.0PTIONAL FILER REFERENCE DATA 1022041-001 NJP