

# 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)

Nixon Peabody LLP  
1300 Clinton Square  
Rochester, NY 14604  
Attn: Terance V. Walsh, Esq.

File with New York State

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a INITIAL FINANCING STATEMENT FILE #

200703260233441 Filed March 26, 2007

1b This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS ☒

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

3. ☐ 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 ☐ Debtor or ☐ 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

☐ 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

☐ ADD name Complete item 7a or 7b, and also item 7c, also complete items 7e-7g (if applicable)

6. CURRENT RECORD INFORMATION

6a ORGANIZATION'S NAME

OR 6b INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

7 CHANGED (NEW) OR ADDED INFORMATION

7a ORGANIZATION'S NAME

OR 7b INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

7c MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

7d SEE INSTRUCTIONS

ADD'L INFO RE ORGANIZATION DEBTOR

7e TYPE OF ORGANIZATION

7f JURISDICTION OF ORGANIZATION

7g ORGANIZATIONAL ID #, if any

Not Applicable

☐ NONE

8 AMENDMENT (COLLATERAL CHANGE) check only one box

Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned

9 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment) If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here ☐ and enter name of DEBTOR authorizing this Amendment

9a ORGANIZATION'S NAME

OR The Bank of New York Mellon (f/k/a The Bank of New York), as Trustee

9b INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

10 OPTIONAL FILER REFERENCE DATA

File with NYS- Circulo (070334/59) Indenture

# 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)	
Nixon Peabody LLP 1300 Clinton Square Rochester, NY 14604 Attn: Terance V. Walsh, Esq.	
File with New York State	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a INITIAL FINANCING STATEMENT FILE # <b>200703260233390 Filed March 26, 2007</b>	1b This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS <input checked="" type="checkbox"/>
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2. <input checked="" type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement
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3. <input type="checkbox"/> 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
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4. <input type="checkbox"/> 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 <input type="checkbox"/> Debtor <u>or</u> <input type="checkbox"/> Secured Party of record Check only <u>one</u> of these two boxes Also check <u>one</u> of the following three boxes and provide appropriate information in items 6 and/or 7
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<input type="checkbox"/> CHANGE name and/or address Please refer to the detailed instructions in regards to changing the name/address of a party	<input type="checkbox"/> DELETE name Give record name to be deleted in item 6a or 6b	<input type="checkbox"/> ADD name Complete item 7a or 7b, and also item 7c, also complete items 7e-7g (if applicable)
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6 CURRENT RECORD INFORMATION			
6a ORGANIZATION'S NAME			
OR	6b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME SUFFIX

7 CHANGED (NEW) OR ADDED INFORMATION			
7a ORGANIZATION'S NAME			
OR	7b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME SUFFIX

7c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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7d <u>SEE INSTRUCTIONS</u> Not Applicable	ADD'L INFO RE ORGANIZATION DEBTOR	7e TYPE OF ORGANIZATION	7f JURISDICTION OF ORGANIZATION	7g ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE
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8 AMENDMENT (COLLATERAL CHANGE) check only <u>one</u> box	
Describe collateral <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned	

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment) If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here <input type="checkbox"/> and enter name of DEBTOR authorizing this Amendment	
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9a ORGANIZATION'S NAME <b>The Bank of New York Mellon (f/k/a The Bank of New York), as Trustee</b>			
OR	9b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME SUFFIX

10. OPTIONAL FILER REFERENCE DATA <b>File with NYS- Circulo (070334/59) Project Costs Mortgage</b>	
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# 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)	
Nixon Peabody LLP 1300 Clinton Square Rochester, NY 14604 Attn: Terance V. Walsh, Esq.	
File with New York State	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a INITIAL FINANCING STATEMENT FILE # 200703260233390 Filed March 26, 2007	1b This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS <input checked="" type="checkbox"/>
---	--

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

3. ☐ 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

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Also check one of the following three boxes and provide appropriate information in items 6 and/or 7

☐ 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 ☐ ADD name Complete item 7a or 7b, and also item 7c, also complete items 7e-7g (if applicable)

6. CURRENT RECORD INFORMATION

6a ORGANIZATION'S NAME			
OR 6b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION

7a ORGANIZATION'S NAME			
OR 7b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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7d SEE INSTRUCTIONS Not Applicable	ADD'L INFO RE ORGANIZATION DEBTOR	7e TYPE OF ORGANIZATION	7f JURISDICTION OF ORGANIZATION	7g ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE
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8 AMENDMENT (COLLATERAL CHANGE). check only one box

Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment) If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here ☐ and enter name of DEBTOR authorizing this Amendment

9a ORGANIZATION'S NAME The Bank of New York Mellon (f/k/a The Bank of New York), as Trustee			
OR 9b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

10 OPTIONAL FILER REFERENCE DATA

File with NYS- Circulo (070334/59) Project Costs Mortgage

# 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)	
Nixon Peabody LLP 1300 Clinton Square Rochester, NY 14604 Attn: Terance V. Walsh, Esq.	
File with New York State	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a INITIAL FINANCING STATEMENT FILE #

200703260233427 Filed March 26, 2007

1b This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS ☒

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

3. ☐ 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 ☐ Debtor or ☐ 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

☐ 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

☐ ADD name Complete item 7a or 7b, and also item 7c, also complete items 7e-7g (if applicable)

6 CURRENT RECORD INFORMATION

6a ORGANIZATION'S NAME

OR	6b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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7 CHANGED (NEW) OR ADDED INFORMATION

7a ORGANIZATION'S NAME

OR	7b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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7c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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7d SEE INSTRUCTIONS Not Applicable	ADD'L INFO RE ORGANIZATION DEBTOR	7e TYPE OF ORGANIZATION	7f JURISDICTION OF ORGANIZATION	7g ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE
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8 AMENDMENT (COLLATERAL CHANGE): check only one box

Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned

9 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment) If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here ☐ and enter name of DEBTOR authorizing this Amendment

9a ORGANIZATION'S NAME

OR	The Bank of New York Mellon (f/k/a The Bank of New York), as Trustee	FIRST NAME	MIDDLE NAME	SUFFIX
	9b INDIVIDUAL'S LAST NAME			

10. OPTIONAL FILER REFERENCE DATA

File with NYS- Circulo (070334/59) Construction Costs Mortgage

# 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)

Nixon Peabody LLP  
1300 Clinton Square  
Rochester, NY 14604  
Attn: Terance V. Walsh, Esq.

File with New York State

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a INITIAL FINANCING STATEMENT FILE #

200703260233415 Filed March 26, 2007

1b This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS ☒

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

3. ☐ 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 ☐ Debtor or ☐ 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

☐ 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 8a or 8b

☐ ADD name Complete item 7a or 7b, and also item 7c, also complete items 7e-7g (if applicable)

6 CURRENT RECORD INFORMATION

6a ORGANIZATION'S NAME

OR 6b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION

7a ORGANIZATION'S NAME

OR 7b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7c MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

7d SEE INSTRUCTIONS Not Applicable ADD'L INFO RE ORGANIZATION DEBTOR 7e TYPE OF ORGANIZATION 7f JURISDICTION OF ORGANIZATION 7g ORGANIZATIONAL ID #, if any ☐ NONE

8. AMENDMENT (COLLATERAL CHANGE): check only one box

Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned

9 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment) If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here ☐ and enter name of DEBTOR authorizing this Amendment

9a ORGANIZATION'S NAME

OR The Bank of New York Mellon (f/k/a The Bank of New York), as Trustee 9b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10. OPTIONAL FILER REFERENCE DATA

File with NYS- Circulo (070334/59) Installment Sale Agreement

# 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)
<div>Nixon Peabody LLP 1300 Clinton Square Rochester, NY 14604 Attn: Terance V. Walsh, Esq.</div> <div>File with Nassau County</div>

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a INITIAL FINANCING STATEMENT FILE # <b>UC07001332 Filed March 28, 2007 amended #1202 on October 7, 2013</b>	1b This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS <input checked="" type="checkbox"/>
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2. <input checked="" type="checkbox"/> <b>TERMINATION</b> : Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement
3. <input type="checkbox"/> <b>CONTINUATION</b> : 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. <input type="checkbox"/> <b>ASSIGNMENT</b> (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. <b>AMENDMENT (PARTY INFORMATION)</b> : This Amendment affects <input type="checkbox"/> Debtor <u>or</u> <input type="checkbox"/> Secured Party of record Check only <u>one</u> of these two boxes Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in items 6 and/or 7 <input type="checkbox"/> CHANGE name and/or address Please refer to the detailed instructions in regards to changing the name/address of a party <input type="checkbox"/> DELETE name Give record name to be deleted in item 6a or 6b <input type="checkbox"/> ADD name Complete item 7a or 7b, and also item 7c, also complete items 7e-7g (if applicable)
--

6. <b>CURRENT RECORD INFORMATION</b>
6a ORGANIZATION'S NAME
OR 6b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7. <b>CHANGED (NEW) OR ADDED INFORMATION</b>
7a ORGANIZATION'S NAME
OR 7b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
7d <b>SEE INSTRUCTIONS</b> Not Applicable	ADD'L INFO RE ORGANIZATION DEBTOR	7e TYPE OF ORGANIZATION	7f JURISDICTION OF ORGANIZATION	7g ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

8. <b>AMENDMENT (COLLATERAL CHANGE)</b> : check only <u>one</u> box Describe collateral <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned
--

9. <b>NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT</b> (name of assignor, if this is an Assignment) If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here <input type="checkbox"/> and enter name of <b>DEBTOR</b> authorizing this Amendment
---

9a ORGANIZATION'S NAME <b>UMB Bank, N.A., as Successor Trustee</b>
OR 9b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10. <b>OPTIONAL FILER REFERENCE DATA</b> <b>File with Nassau County - Circulo (070334/59) Installment Sale Agreement</b>
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# 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)
<div>Nixon Peabody LLP 1300 Clinton Square Rochester, NY 14604 Attn: Terance V. Walsh, Esq.</div> <div>File with Nassau County</div>

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a INITIAL FINANCING STATEMENT FILE # <b>UC07001330 Filed March 28, 2007 Amended #1204 on October 7, 2013</b>	1b This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS <input checked="" type="checkbox"/>
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2. <input checked="" type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement
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3. <input type="checkbox"/> 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
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4. <input type="checkbox"/> 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
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5. AMENDMENT (PARTY INFORMATION): This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these two boxes		
Also check <u>one</u> of the following three boxes and provide appropriate information in items 6 and/or 7		
<input type="checkbox"/> CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party	<input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b	<input type="checkbox"/> ADD name: Complete item 7a or 7b, and also item 7c, also complete items 7e-7g (if applicable)

6 CURRENT RECORD INFORMATION				
6a ORGANIZATION'S NAME				
OR	6b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7 CHANGED (NEW) OR ADDED INFORMATION				
7a ORGANIZATION'S NAME				
OR	7b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
7d SEE INSTRUCTIONS Not Applicable	ADD'L INFO RE ORGANIZATION DEBTOR	7e TYPE OF ORGANIZATION	7f JURISDICTION OF ORGANIZATION	7g ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

8. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box	
Describe collateral <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned	

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9a ORGANIZATION'S NAME <b>UMB Bank, N.A., as Successor Trustee</b>				
OR	9b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

10. OPTIONAL FILER REFERENCE DATA <b>File with Nassau County - Circulo (070334/59) Mortgage (Const Costs)</b>			
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# 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)	
Nixon Peabody LLP 1300 Clinton Square Rochester, NY 14604 Attn: Terance V. Walsh, Esq.	
File with Nassau County	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a INITIAL FINANCING STATEMENT FILE # <b>UC07001331 Filed March 28, 2007 amended #1209 on October 7, 2013</b>	1b This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS <input checked="" type="checkbox"/>
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2. <input checked="" type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement
3. <input type="checkbox"/> 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. <input type="checkbox"/> 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 <input type="checkbox"/> Debtor or <input type="checkbox"/> 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			
<input type="checkbox"/> CHANGE name and/or address Please refer to the detailed instructions in regards to changing the name/address of a party	<input type="checkbox"/> DELETE name Give record name to be deleted in item 6a or 6b	<input type="checkbox"/> ADD name Complete item 7a or 7b, and also item 7c, also complete items 7e-7g (if applicable)	

6. CURRENT RECORD INFORMATION				
6a ORGANIZATION'S NAME				
OR	6b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7 CHANGED (NEW) OR ADDED INFORMATION				
7a ORGANIZATION'S NAME				
OR	7b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7c MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
7d SEE INSTRUCTIONS Not Applicable	ADD'L INFO RE ORGANIZATION DEBTOR	7e TYPE OF ORGANIZATION	7f JURISDICTION OF ORGANIZATION	7g ORGANIZATIONAL ID #, if any	
					<input type="checkbox"/> NONE

8. AMENDMENT (COLLATERAL CHANGE). check only one box	
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9a ORGANIZATION'S NAME				
UMB Bank, N.A., as Successor Trustee				
OR	9b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

10 OPTIONAL FILER REFERENCE DATA	
File with Nassau County - Circulo (070334/59) Mortgage (Project Costs)	