<b>2016-726983</b> 5/23/2016 10: BOOK: 929 PAGE: 454 FEES: \$1 EDA SCHUNK THOMPSON, SHERID
EDA SCITSTA

	C FINANCING STATEMENT AMENDME OW INSTRUCTIONS	ENT				
	AME & PHONE OF CONTACT AT FILER (optional)		7			
V	anessa A. Orta 405-236-0003					
B. E	MAIL CONTACT AT FILER (optional)		1			
C. S	END ACKNOWLEDGMENT TO: (Name and Address)		_			
Γ	– Anderson, McCoy & Orta PC	コ				
	100 North Broadway, Suite 2600					
	Oklahoma City, OK 73102					
1		i				
	<b>-</b>		THE ABOVE S	PACE IS FOR FII	ING OFFICE USE	ONLY
	ITIAL FINANCING STATEMENT FILE NUMBER		1b. This FINANCING STA (or recorded) in the RI			record]
201	6-725269; Bk 923, Pg 726 filed 2/29/16		Filer: attach Amendment	Addendum (Form UC	C3Ad) <u>and</u> provide Debto	
2	TERMINATION: Effectiveness of the Financing Statement identified a Statement	above is terminated	with respect to the security into	erest(s) of Secured	Party authorizing this	Termination
3. 🗸	ASSIGNMENT (full): Provide name of Assignee in item 7a for partial assignment, complete items 7 and 9 and also indicate affects	or 7b, <u>and</u> address o ed collateral in item	of Assignee in item 7c <u>and</u> nam 8	e of Assignor in ite	m 9	
4.	CONTINUATION: Effectiveness of the Financing Statement identifier continued for the additional period provided by applicable law	d above with respec	t to the security interest(s) of S	Secured Party author	orizing this Continuation	on Statement is
5.	PARTY INFORMATION CHANGE:					<del></del>
Che		one of these three t				
	Change affects Debtor or Secured Party of record ite	HANGE name and/or om 6a or 6b; <u>and</u> item	7a or 7b <u>and</u> item 7c 7a or	name: Complete iter 7b, <u>and</u> item 7c	n DELETE name: to be deleted in i	Give record name tem 6a or 6b
6. CL	IRRENT RECORD INFORMATION: Complete for Party information C a. ORGANIZATION'S NAME	hange - provide only	one name (6a or 6b)			
OR .						
6	b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIONAL N	IAME(S)/INITIAL(S)	SUFFIX
7. CI	ANGED OR ADDED INFORMATION: Complete for Assignment or Party Info	prmation Change - provide	only one name (7a or 7b) (use exact, fu	Il name; do not omit, mod	lify, or abbreviate any part of	f the Debtor's name)
171	B. OHGANIZATION'S NAME			<u>.</u>		,
	VILMINGTON TRUST, NATIONAL ASSOCIAT 5. INDIVIDUAL'S SURNAME	ION, AS TRU	JSTEE*			
	INDIVIDUAL'S FIRST PERSONAL NAME	1/ <b>4</b> ·				
-	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	···				SUFFIX
						SUFFIX
7c. M	ILING ADDRESS	CITY		STATE POS	TAL CODE	COUNTRY
110	North Market Street	Wilmingto	on	1 1	890	USA
8. 🔲	COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE covere	d collateral A	SSIGN collateral
	Indicate collateral:		_	_		
* FO	R THE BENEFIT OF THE REGISTERED HOLI	DERS OF W	ELLS FARGO COM	MERCIAL M	ORTGAGE TE	RUST
2016	3-C33, COMMERCIAL MORTGAGE PASS-THE	ROUGH CER	TIFICATES, SERIE	S 2016-C33		
		<u>.</u>				
9. NA If th	ME OF SECURED PARTY OF RECORD AUTHORIZING THIS is an Amendment authorized by a DEBTOR, check here 🔲 and proving the control of the control o			) (name of Assignor,	if this is an Assignme	nt)
	a. ORGANIZATION'S NAME	de name of authorizi	ng Deblor			
F	RIALTO MORTGAGE FINANCE, LLC					
∩D L	O. INDIVIDUAL'S SURNAME	FIRST PERSON	NAL NAME	ADDITIONAL N	AME(S)/INITIAL(S)	SUFFIX
	TIONAL EILED DESERRINGS DATA:			Ì		1
Walg	rtional filer reference data: greens Sheridan Reference No.: 4428.019 FILE	WITH SHEF	RIDAN COUNTY, W	Y		



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## **UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS**

11. 20	11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 2016-725269; Bk 923, Pg 726 filed 2/29/16					
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form						
	12a. ORGANIZATION'S NAME RIALTO MORTGAGE FINANCE, LLC			1		
	NALTO WORTGAGE FINANCE, LLC			ļ		
1						
OR	R 12b. INDIVIDUAL'S SURNAME			•		
	FIRST PERSONAL NAME			1		
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX			
			SOFFIX	THE ABOVE	SPACE IS FOR FILING OFFICE U	ICE ONI V
13.	Name of DEBTOR on related financing statement (Name of a current Debto	or of record re	equired for index	ring purposes only in s	ome filing offices - see Instruction item	
	one Deptor name (13a or 13b) (use exact, full name; do not omit, modify, or abbrev	viate any par	of the Debtor's	name); see Instruction	ns if name does not fit	,
	13a, ORGANIZATION'S NAME WAG SHERIDAN LLC				·	
OR		FIRST DED	ONAL MARKE		LADDITIONAL MANE (OVERLISTIA) (OV	Tours
20	TOO. INDIVIDUAL O COLUMNIE	FIRST PER	SONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
14.	ADDITIONAL SPACE FOR ITEM 8 (Collateral):	-				
		NO	. 2016-	726002 4	20101	
		ED/	SCHUNK	THOMPSON	SSIGN FIXTURE FI	ING
		AND	ERSON M	CCOY & ORTA	, SHERIDAN COUNTY CI 100 NORTH BROADWA	ERK
		OK	LAHOMA C	ITY OK 7310	)	Y 26TH FL
						911
15. T	his FINANCING STATEMENT AMENDMENT:		17. Description	on of real estate:		<del></del>
16 1	covers timber to be cut	a fixture filin	9			
10.1	lame and address of a RECORD OWNER of real estate described in item 17 if Debtor does not have a record interest):					
18. N	MISCELLANEOUS:					
				<u>.</u>		