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	0452696	2022 Dec 09
		
JCC FINANCING STATEMENT AMENI	DMENT	
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FOLLOW INSTRUCTIONS (front and back) CAREFULLY	DMENT	

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FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
A. NAME & PHONE OF CONTACT AT FILER [optional]			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
[NPFC SPV 1 Inc	<u> </u>		
433 North Camden Drive, Suite 725 Beverly Hills, CA 90210, USA	il I		
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<u> </u>	TUE ADOL	IT ODACE IO DODIEU INO OFFICE HOS	ONLY
1a. INITIAL FINANCING STATEMENT FILE # 202202108068546 Filedate: 10		/E SPACE IS FOR FILING OFFICE USE 1b. This FINANCING STATEMENT	
		to be filed [for record] (or record REAL ESTATE RECORDS.	ded) in the
2. X TERMINATION: Effectiveness of the Financing Statement identified above	e is terminated with respect to security interest(s)	of the Secured Party authorizing this Terminati	on Statement.
CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law.	bove with respect to security interest(s) of the S	Secured Party authorizing this Continuation Sta	atement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b ar	nd address of assignee in item 7c and also give n	ame of assignor in item 9.	
· · · · · ·	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 THIS CHANGE name and/or address: Give current record name in item 6a or 6b:		rd name ADD name: Complete item 7a 6b. aitem 7c, also complete items 7	or 7b, and also
CHANGE name and/or address: Give current record name in item 6a or 6b; name (if name change) in item 7a or 7b and/or new address (if address chan 6. CURRENT RECORD INFORMATION:	ge) in item 7c. Lato be deleted in item 6a or	6bitem 7c, also complete items 7	d-7g (if applicable).
6a. ORGANIZATION'S NAME Novea Inc			
08			
Gb. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
	•		
7c. MAILING ADDRESS	СПУ	STATE POSTAL CODE	COUNTRY
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any	
ORGANIZATION DEBTOR			NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateral deleted or added, or give entire restated colla	teral description, or describe collateral 🔲 ass	igned.	
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A adds collateral or adds the authorizing Debtor, or if this is a Termination authoriz	MENDMENT (name of assignor, if this is an Asset of by a Debtor, check here [X] and enter name of	signment). If this is an Amendment authorized I	by a Debtor which
9a. ORGANIZATION'S NAME NPFC SPV 1 INC		• • • • • • • • • • • • • • • • • • • •	
9b, INDIVIDUAL'S LAST NAME	FIRST NAME	MIDOLE NAME	SUFFIX
40 ODTIONAL SILED DESCRIPTION DATA			
10, OPTIONAL FILER REFERENCE DATA	•		

FILING OFFICE COPY -- NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)