

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

NPFC SPV 1 Inc
30 N Gould Street
Sheridan Wyoming 82801, USA



THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
2022-21302520

1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. **ASSIGNMENT (full or partial):** Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. **PARTY INFORMATION CHANGE:**
Check one of these two boxes: Debtor or Secured Party of record
AND Check one of these three boxes to:
 CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c
 ADD name: Complete item 7a or 7b, and item 7c
 DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME
Newpoint Financial Corp

OR

6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
--------------------------	---------------------	-------------------------------	--------

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME
NPFC SPV 1, Inc.

OR

7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
---------------------	------	-------	-------------	---------

8. **COLLATERAL CHANGE:** Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME
Newpoint Financial Corp

OR

9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
--------------------------	---------------------	-------------------------------	--------

10. OPTIONAL FILER REFERENCE DATA:

STATE OF WYOMING * SECRETARY OF STATE

EDWARD A. BUCHANAN

BUSINESS DIVISION

Herschler Bldg East, Ste.100 & 101 , Cheyenne, WY 82002-0020

Phone: 307-777-7311

Email: UCC@wyo.gov

NPFC SPV 1 INC
30 N GOULD STREET
SHERIDAN, WY 82801

June 22, 2022

UCC3 Acknowledgment

AMENDMENT INFORMATION

Document #: 2022-22134625
Filing Date: 06/22/2022
Amendment Actions: Change Secured Party (1)
Financing Statement Document #: 2022-21302520
First Debtor on Record: NMS SPECIAL OPPORTUNITY FUND LP
Financing Statement Lapse Date: 03/10/2032

AUTHORIZING PARTY

Organization Name (Secured Party): NEWPOINT FINANCIAL CORP.

CHANGE SECURED PARTY

Changed From

From Secured Party Name: NEWPOINT FINANCIAL CORP.
From Address: 30 N. GOULD ST.
SHERIDAN, WY 82801

Changed To

Secured Party Name: NPFC SPV 1, INC.
Address: 30 N. GOULD ST.
SHERIDAN, WY 82801

This acknowledges the filing of the attached document. If we may be of any further service to you, please contact us at the number noted above.



EDWARD A. BUCHANAN
SECRETARY OF STATE
State of Wyoming

Enclosures: Original Documents

RECEIPT



Secretary of State
Herschler Bldg East, Ste.100 & 101
Cheyenne, WY 82002-0020

CYNDY JACKSON
1507 LAMPMAN CT
CHEYENNE, WY 82007

RECEIPT INFORMATION

Receipt #: **002620160**
Receipt Date: **06/22/2022**
Processed By: **Nicole Martinez**

DO NOT PAY!
This is not a bill.

Description of Charges	Reference	Quantity	Unit Price	Total
UCC3 - Secured Party Change	2022-22134625	1	\$15.00	\$15.00
TOTAL CHARGES PAID				\$15.00

Description of Payment	Reference	Amount
Payment-PAD Account	00271	\$15.00
TOTAL PAYMENT		\$15.00

PAD Account: **00271 - CYNDY JACKSON**

PAD Begin Balance: **\$485.35**

PAD End Balance: **\$470.35**

In Reference To:

Amendment Doc ID: 2022-22134625. Initial Filing Doc ID: 2022-21302520

PAD or Billing Questions?
(307) 777-5343
SOSAdminServices@wyo.gov