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OLLOW INSTRUCTION	G STATEMENT AMENDMEN S (front and back) CAREFULLY			
A. NAME & PHONE OF C Attila ALPEREN +1 87	CONTACT AT FILER [optional] 78 257 3736			
3. SEND ACKNOWLEDG	SMENT TO: (Name and Address)			
	TION LTD (MERSIS: 0926090331500001) H KEMER SK 106/7 SKISEHIR,			
L			ACE IS FOR FILING OFFICE USE (
a. INITIAL FINANCING STAT	TEMENT FILE# 202202178081625 Filedate: 17-FF	≣B-22	1b. This FINANCING STATEMENT At to be filed [for record] (or record)	
. TERMINATION: Ef	fectiveness of the Financing Statement identified above is	terminated with respect to security interest(s) of the	REAL ESTATE RECORDS. Secured Party authorizing this Termination	Statement.
. CONTINUATION:	Effectiveness of the Financing Statement identified abov tional period provided by applicable law.			
. ASSIGNMENT (full-	or partial): Give name of assignee in item 7a or 7b and a	ddress of assignee in item 7¢ and also give name of	assignor in item 9.	
. AMENDMENT (PART)	Y INFORMATION): This Amendment affects Deb	tor or Secured Party of record. Check only or	ne of these two boxes.	
	wing three boxes and provide appropriate information in its		AOD name: Committee Nove 30	e 7h and ala-
	address: Give current record name in item 6a or 6b; also) in item 7a or 7b and/or new address (if address change)	give new in item 7c. DELETE name: Give record name to be deleted in item 6a or 6b.	e ADD name: Complete item 7a o item 7c, also complete items 7d	or /b, and also -7g (if applicabl
6a. ORGANIZATION'S N				
R 6b. INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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7b. INDIVIDUAL'S LAST C. MAILING ADDRESS d. SEE INSTRUCTIONS	NAME ADD'L INFO RE 7e, TYPE OF ORGANIZATION ORGANIZATION	CITY	STATE POSTAL CODE	
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