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## UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

|   |
|---|
| A. NAME & PHONE OF CONTACT AT FILER [optional]<br>Rodák Mária +36 30 644 2438   |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address)<br><br>Rodák, Mária<br>Nagymező 337; utca 6. Fsz. 2.<br>Vác, HU 2600, HUN |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

|   |                                   |                          |                                  |  |  |
|---|-----------------------------------|--------------------------|----------------------------------|--|--|
| 1a. INITIAL FINANCING STATEMENT FILE # 202112248561829 Filedate: 24-DEC-21  |                                   |                          |                                  | 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.<br><input type="checkbox"/> |  |
| 2. <input 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.<br>Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.<br><input type="checkbox"/> CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. <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 7d-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<br><input type="checkbox"/> NONE |
| 8. AMENDMENT (COLLATERAL CHANGE): check only one box.<br>Describe collateral <input type="checkbox"/> deleted or <input checked="" type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned.<br><b>ALL RIGHT RESERVED WITHOUT PREJUDICE, WITH DUE STANDING, AUTHORITY, and AUTHORIZATION public policy, UCC 1-308, UCC Doc. No. 202112248561829, is hereby duly amended only to include the following additional collateral as follows: 9. Universal and International Law Ordinance UCC Doc. No. 202401198034913, specifically Articles 1-8, are restated and incorporated in its entirety here as if set forth in full; Duly verified as duly reconfirmed and ratified, entered into Universal Law Ordinance, notice by action of entry into International Law Ordinance, notice by registration, public policy UCC-1-202.</b><br><b>10. This Universal and International Law Ordinance, specifically Articles 1-9, are restated and incorporated in its entirety here as if set forth in full; Duly verified as duly reconfirmed and ratified, entered into Universal Law Ordinance, notice by action of entry into International Law Ordinance, notice by registration, public policy UCC-1-202.</b><br><b>The date are wrong in UCC Doc. No. 202401198034848 and in UCC Doc. No. 202401198034913. In UCC Doc. No. 202401198034848 the correct dates is: this January 19 th, in the year of our creator, Two Thousand and Twenty-four. In UCC Doc. No. 202401198034913 the correct dates is: this January 19, 2024.</b><br><b>/s/ Rodák Mária, as Bondservant; /s/ Rodák Mária, as State of Body; Debtor names added for indexing: The One People's Public Trust, 1776, Dr. Herman Szilárd, Dr. Horváth Imre, Gál Zsombor, Laukó Dávid, Bártfali Csilla, Hajduk Hajnalka, Mártai Mónika, Dr. Oláh Gergely László;</b> |                                   |                          |                                  |  |  |
| 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.   |                                   |                          |                                  |  |  |
| 9a. ORGANIZATION'S NAME   |                                   |                          |                                  |  |  |
| OR  |                                   |                          |                                  |  |  |
| 9b. INDIVIDUAL'S LAST NAME RODÁK  |                                   | FIRST NAME MÁRIA         |                                  | MIDDLE NAME  | SUFFIX   |
| 10. OPTIONAL FILER REFERENCE DATA   |                                   |                          |                                  |  |  |