ENDORSEMENT

Attached to Policy No.

Issued by

WFG NATIONAL TITLE INSURANCE COMPANY

 The Company hereby insures the owners of the name (name or title of bonds) referred to in Schedule A, as their interests may appear, against loss or damage sustained by reason of the failure of (i) the sublease referred to in paragraph of Part II of Schedule B, hereinafter referred to as "Sublease," to be valid at Date of Policy as to the land described therein, and (ii) at the commencement of its term to be binding as to the land described therein, subject to the following:

(a) Any facts, rights, interests or claims which are not shown by the public records but which could be ascertained by making inquiry of the lessor under either the lease referred to in Schedule A or the Sublease;

(b) Any failure to comply with the terms and provisions of the lease referred to in Schedule A or the Sublease;

(c) Any acts of a party to the Sublease, or its successors in interest, by which any rights, interests or obligations thereunder are released or impaired; and

(d) Any termination of the Sublease pursuant to the terms and provisions thereof.

This endorsement does not insure against loss or damage, and the Company will not pay costs, attorneys' fees, or expenses, by reason of any claim that arises out of the operation of federal bankruptcy, state insolvency, or similar creditors' rights laws asserting:

1. a fraudulent conveyance or fraudulent transfer; or

2. a preferential transfer.

This endorsement is issued as part of the policy. Except as it expressly states, it does not (i) modify any of the terms and provisions of the policy, (ii) modify any prior endorsements, (iii) extend the Date of Policy, or (iv) increase the Amount of Insurance. To the extent a provision of the policy or a previous endorsement is inconsistent with an express provision of this endorsement, this endorsement controls. Otherwise, this endorsement is subject to all of the terms and provisions of the policy and of any prior endorsements.

Dated:

WFG NATIONAL TITLE INSURANCE COMPANY

 By\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Signatory