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| TERMI | NATION: Effe | ctiveness of the Fir | nancing Statement identified abo | e is terminated with respect to | security interest(s) of | | | |
| | | | Financing Statement identified and by applicable law. | bove with respect to security | interest(s) of the Sec | ured Party autho | orizing this Continuation | Statement is |
| | | | ne of assignee in item 7a or 7b a | nd address of assignee in item | 7c; and also give nan | ne of assignor in | item 9. | |
| | | | | | y of record. Check or | | | |
| | | | provide appropriate information | | E same: Cive record | | D name: Complete iten | n 7a or 7h and a |
| l name (if | name change) i | n item 7a or 7b and | nt record name in item 6a or 6b; d/or new address (if address cha | | E name: Give record eleted in item 6a or 6t | name AL ite | D name: Complete iten m 7c; also complete iten | n 7a or 7b, and a ns 7d-7g (if appli |
| | RECORD INF | | | | | | <u></u> | |
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| . CHANGED 7a. ORGA 7b. INDIVI c. MAILING AI d. TAX ID #: | (NEW) OR AD NIZATION'S NA DUAL'S LAST M DDRESS SSN OR EIN ENT (COLLAT | ADD'L INFORMAT | 7e. TYPE OF ORGANIZATION =): check only <u>one</u> box. | FIRST NAME CITY 7f. JURISDICTION OF C | | MIDDLE STATE 7g. ORG | NAME POSTAL CODE | |
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| FARM PRODUCTS AMENDMENT - | | | |
|--|---|--|-------------------------------------|
| FARIN PRODUCTS AMENDIVIENT - | UCC-JF | | |
| A. NAME & PHONE OF CONTACT AT FILER [optional] | | | |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address) | | | |
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| | | CE IS FOR FILING OFFICE USE O | NLY |
| 1a. INITIAL FINANCING STATEMENT FILE # | | 1b. This FINANCING STATEMENT AN to be filed [for record] (or recorded | MENDMENT is |
| 2. TERMINATION: Effectiveness of the Financing Statement identified above is to | erminated with respect to security interest(s) of the S | REAL ESTATE RECORDS. | |
| 3. CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law. | with respect to security interest(s) of the Secured F | Party authorizing this Continuation State | ment is |
| 4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and add | dress of assignee in item 7c; and also give name of a | ssignor in item 9. | |
| AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor Also check one of the following three boxes and provide appropriate information in iter | or <u>or</u> Secured Party of record. Check only <u>one</u> ms 8 and/or 7. | of these two boxes. | |
| CHANGE name and/or address: Give current record name in item 6a or 6b; also g name (if name change) in item 7a or 7b and/or new address (if address change) in | nive new DELETE name: Give record name | ADD name: Complete item 7a or item 7c; also complete items 7d- | 7b, and also (g (if applicable). |
| 6. CURRENT RECORD INFORMATION: | | | |
| 6a. ORGANIZATION'S NAME | | | |
| OR 6b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX |
| 1 7. CHANGED (NEW) OR ADDED INFORMATION: 7a, ORGANIZATION'S NAME | | | |
| OR 75. INDIVIDUAL'S LAST NAME | FIRST NAME | | SUFFIX |
| | | | |
| 7c. MAILING ADDRESS | CITY | STATE POSTAL CODE | COUNTRY |
| 7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR | 7f. JURISDICTION OF ORGANIZATION | 7g. ORGANIZATIONAL ID #, if any | |
| 8. AMENDMENT (COLLATERAL CHANGE): check only one box. | · | | |
| Describe collateral 🔲 deleted or 🗌 added, or give entire 🗌 restated collateral | description, or describe collateral lassigned. | | |
| Item Product County Produced <u>No. Code</u> <u>Code</u> | | ount, if <u>essary Unit</u> | |
| 1. | | | |
| 2. | | | |
| Additional information (not to exceed 150 characters and sp | paces): | | |
| | | | |
| 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMEN | NDMENT (name of assignor, if this is an Assignmen | ÿ . | |
| 9a. ORĜANIZATION'S NAME | | · · · · · · · · · · · · · · · · · · · | |
| OR 96. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX |
| | Conned Douts Simologic | | |
| Debtor Signature(s): | Secured Party Signature | • | |
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| | L | | | |] | THE ABOVE S | PACE IS FO | R FILING OFFICE USE C | DNLY |
| 1a. IN | ITIAL FINANC | CING STATEMENT FILE # | e e e e e e e e e e e e e e e e e e e | | | | | s FINANCING STATEMENT A be filed [for record] (or recorde | |
| 2. | TERMINAT | TION: Effectiveness of th | e Financing Statement identified ab | ove is terr | ninated with res | pect to security interest(s) of t | | AL ESTATE RECORDS. rty authorizing this Termination | n Statement. |
| 3. | | ATION: Effectiveness of r the additional period pro | the Financing Statement identified wided by applicable law. | l above w | ith respect to se | curity interest(s) of the Secu | ed Party auth | orizing this Continuation State | ement is |
| 4. | ASSIGNME | ENT (full or partial): Give | name of assignee in item 7a or 7b : | and addre | ss of assignee in | n item 7c; and also give name | of assignor in | item 9. | |
| | | | ION): This Amendment affects s and provide appropriate information | Debtor n in items | | d Party of record. Check only | one of these | two boxes. | |
| | CHANGE nar name (if nam | me and/or address: Give ne change) in item 7a or 7 | current record name in item 6a or 6b b and/or new address (if address cha | | | ELETE name: Give record na be deleted in item 6a or 6b. | ime Al | DD name: Complete item 7a c m 7c; also complete items 7d | or 7b, and also -7g (if applicable). |
| | | CORD INFORMATION: | | | <u></u> | | | | |
| OR | | L'S LAST NAME | | F | RSTNAME | | MIDDLE | NAME | SUFFIX |
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| - | | W) OR ADDED INFORM | MATION: | | | | | | |
| OR | | | <u></u> | le | DOTMANT | | MIDDLE | NAME | SUFFIX |
| ľ | /b. INDIVIDUA | L'S LAST NAME | | | RST NAME | | WIDDLE | NAME | JUTIX |
| 7c. M | AILING ADDR | ESS | | c | ITY | | STATE | POSTAL CODE | COUNTRY |
| 7d. T | AX ID #: SSM | ORGANIZAT | RE 7. TYPE OF ORGANIZATION | N 71 | JURISDICTIO | N OF ORGANIZATION | 7g. ORC | I ANIZATIONAL ID #, if any | |
| 8. AI | MENDMENT | COLLATERAL CHA | NGE): check only <u>one</u> box. | | | | | | NUNE |
| De | scribe collater | ral deleted or ad | ded, or give entire restated col | llateral de | scription, or de | scribe collateral assigne | d. | | |
| | Item | Product | County Produced Code | | Crop Year less than | ())) | mount, if hecessary | <u>Unit</u> | |
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| | 1. | | | | | | | | |
| | 2. | | | |)- | | | | |
| | Addition | al information (not | to exceed 150 characters a | ina spa | | | | | |
| | | | | | | | | | |
| 9. N/ | 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). | | | | | | | | |
| ſ | 9a. ORGANIZA | TION'S NAME | | | | | | | |
| OR | 96. INDIVIDUA | L'S LAST NAME | | F | IRST NAME | | MIDDLE | NAME | SUFFIX |
| \square | | | | | | ~ | | | 1 |
| | Debtor S | ignature(s): | | | | Secured Party Signat | ire: | | |
| | | | | | | | | | |

Instructions for Farm Products Amendment (UCC-3F)

Please type or laser-print this form. Be sure it is completely legible. Read all instruction, especially instruction 1a; correct file number of initial Farm Products Filing is crucial. Follow instruction completely.

Fill in form very carefully; mistakes may have important legal consequences. If you have questions consult your attorney. Filing office cannot give legal advice.

Do not insert anything in the open space in the upper portion of this form; it is reserved for filing office use.

When properly completed, send Filing Office Copy with required fee to filing office.

If you need to use attachments use UCC-2F or plain sheets of 8-1/2 X 11 inch paper and put the name of the first Debtor at the top of each attached sheet.

Always complete items 1a and 9.

- A. To assist filing office personnel who may wish to communicate with filer, filer may provide information in item A. This item is optional.
- B. Complete item B if you want an acknowledgement copy sent to you. The copy will be returned in a window envelope to the address shown in item B. You may send the Acknowledgement Copy of this form with your filing or one dollar (\$1.00) to receive a computer generated copy.
- 1a. <u>File number</u>: Enter file number of initial Farm Products Filing to which this amendment relates. Enter only one file number.

Note: Show purpose of this Amendment by checking 2, 3, 4, 5 (in item 5 you must check two boxes) or 8; also complete items 6, 7 and/or 8 as appropriate. Filer may use this amendment to simultaneously accomplish both data changes (items 4, 5 and/or 8) and a Continuation (item 3), filer is still required to pay the fee for each individual action.

- 2. To <u>terminate</u> the effectiveness of the identified Farm Products Filing with respect to security interest(s) of authorizing Secured Party, check box 2. See instruction 9. No other activity may be combined with a termination.
- 3. To <u>continue</u> the effectiveness of the identified Farm Products Filing with respect to security interest(s) of authorizing Secured Party, check box 3. See instruction 9.
- 4. To <u>assign</u> (i) all of the assignor's interest under the identified Farm Products Filing, or (ii) a partial interest in the security interest covered by the identified Farm Products Filing, or (iii) assignor's full interest in some (but not all) of the collateral covered by the identified Farm Products Filing: Check box in item 4 and enter name of assignee in item 7a if assignee is an organization, or in item 7b, formatted as indicated, if assignee is an individual. Complete 7a or 7b, but not both. Also enter assignee's address in item 7c. Also enter name of assignor in item 9. If partial Assignment affects only some (but not all) of the collateral covered by the identified Farm Products Filing, filer may check appropriate box in item 8 and Indicate the affected collateral in item 8.
- 5, 6, 7. To <u>change the name and/or address</u> of a party: Check box in item 5 to indicate whether this Amendment amends information relating to a Debtor or a Secured Party; also check box in item 5 to indicate that this is a name and/or address change; also enter name of affected party (current record name, in case of a name change) in item 6a or 6b as appropriate; and also give new name (7a or 7b) and/or new address (7c) in item 7.
- 5, 6. To <u>delete</u> a party: Check box in item 5 to indicate whether deleting a Debtor or a Secured Party; also check box in item 5 to indicate that this is a deletion of a party; and also enter name (6a or 6b) of deleted party in item 6.
- 5, 7. To add a party: Check box in item 5 to indicate whether adding a Debtor or a Secured Party; also check box in item 5 to indicate that this is an addition of a party; also enter all required information in item 7: name (7a or 7b) and address (7c); also, if adding a Debtor, Tax ID# (7d), and additional organization Debtor information (7e-g) if added Debtor is an organization. Note: The preferred method for filing against a new Debtor (an individual or organization not previously of record as a Debtor under this file number) is to file a new Farm Products Filing (UCC-1F) and not an Amendment (UCC-3F).

- 8. Collateral Change: To change the collateral covered by the identified Farm Products Filing, describe the change in item 8. This may be accomplished either by by describing the collateral to be added or deleted, as formatted by instructions 4b-f of UCC-1F, or by setting forth in full the collateral description (as formatted) as it is to be effective after the filing of this Amendment, indicating clearly the method chosen (check the appropriate box). If the space in item 8 is insufficient, use item 13 of Farm Products Addendum (UCC-2F). A partial release of collateral is a deletion. If, due to a full release of all collateral, filer no longer claims a security intereest under the identified Farm Products Filing, check box 2 (Termination) and not box 8 (Collateral Change). If a partial assignment consists of the assignment of some (but not all) of the collateral covered by the identified Farm Products Filing, filer may indicate the assigned collateral in item 8, check the appropriate box in item 8, and also comply with instruction 4 of these instructions.
- Always enter the name of the party of record authorizing this Amendment; this will be the Secured Party of record.

<u>Debtor's Signature(s)</u>: Each individual debtor must sign if box 5 or the 'added' or 'restated' block in box 8 is checked. Corporate debtor must be signed by corporate officer. A Partnership debtor must be signed by a general partner.

Secured Party Signature: The secured party must sign.