

12/18/85

This STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code

1. BOOK NO. 0385 1257-1267 NO. 114785	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT March 15, 1985	1B. DATE OF ORIG. FINANCING STATEMENT March 11, 1985	1C. PLACE OF FILING ORIG. FINANCING STATEMENT Douglas County
2. DEBTOR (LAST NAME FIRST) NEVADA CARSON, INC., a Nevada corporation			2A. SOCIAL SECURITY OR FEDERAL TAX NO.

2B. MAILING ADDRESS 1470 Main Street P. O. Box 277	2C. CITY, STATE Gardnerville, Nevada	2D. ZIP CODE 89410
3. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		3A. SOCIAL SECURITY OR FEDERAL TAX NO.

4. SECURED PARTY NAME CONNECTICUT GENERAL LIFE INSURANCE COMPANY C/O CIGNA CAPITAL ADVISERS, INC. MAILING ADDRESS Hartford CITY Hartford STATE Connecticut ZIP CODE 06152	4A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO. Federal Tax No. [REDACTED] 370
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5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE	5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.
6. <input type="checkbox"/> CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, fixtures, or oil, gas or minerals check here <input type="checkbox"/> and insert description of real property on which growing or to be grown or to which affixed or to be affixed or from which to be extracted in Item 7 below. If crops or fixtures, also insert name of record owner of real estate. Effective if submitted within 6 months of expiration date.	
<input type="checkbox"/> RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 7 below. Release does not terminate debt.	
<input type="checkbox"/> ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 7 below.	
<input checked="" type="checkbox"/> TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above.	
<input type="checkbox"/> AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 7 below. (Signature of Debtor and Secured Party required on all amendments.)	
<input type="checkbox"/> OTHER (May be used for change of address.)	

7.

8. (Date) July 3, 19 85

By: SEAL  
 SIGNATURE(S) OF DEBTOR(S) (TITLE)  
 CONNECTICUT GENERAL LIFE INSURANCE COMPANY  
 BY: CIGNA CAPITAL ADVISERS, INC.

By: Edward Row  
 SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)  
 Edward Row, Vice President

9. This Space for Use of Filing Officer  
 (Date, Time, Filing Office)

REQUESTED BY  
**DOUGLAS COUNTY TITLE**  
 IN OFFICIAL RECORDS OF  
 DOUGLAS CO., NEVADA

'85 JUL 19 P12:26

SUZANNE BEAUDREAU  
 RECORDER

\$5.00 PAID Bh DEPUTY **120409**

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10. Return Copy to

NAME DOANE-WESTERN COMPANY  
 ADDRESS P. O. BOX 320  
 CITY, STATE RENO, NEVADA 89504  
 AND ZIP

THIS SPACE FOR USE OF FILING OFFICER