UCC-2 G79 NV IMPORTANT—Read instructions on back before filling out form This STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code IA. DATE OF FILING OF ORIG. FINANCING NOVEMBER 15, 1983 B. DATE OF ORIG. FINANCING STATEMENT IC. PLACE OF FILING ORIG. FINANCING November 3, 1983 Douglas 2. DESTOR (LAST NAME FIRST) 2A. SOCIAL SECURITY OR FEDERAL TAX NO White, Ronald O. 28. MAILING ADDRESS 2C. CITY, STATE 2D. ZIP CODE P. O. Box 2427 Gardnerville, Nevada 89410 3. ADDITIONAL DESTOR (IF ANY) (LAST NAME FIRST) 3A. SOCIAL SECURITY OR FEDERAL TAX NO White, Linda 38. MAILING ADDRESS 3C. CITY STATE 3D. ZIP CODE same 4. SECURED PARTY SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO. . Norwest Financial Nevada, Inc. MAME P. O. Box 2549 MAILING ADDRESS Carson City, Nevada 89702 STATE ZIP CODE ASSIGNEE OF SECURED PARTY (IF ANY) SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.D.A. NO. MAILING ADDRESS 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, check here 🔲 and insert description of real property on which growing or to be grown in Item 7 below. 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. 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. -The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above. AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 7 below. (Signature of Debtor required on all amendements.) **OTHER** 9 71LING 9. This Space for Use of Filing Officer **19** 85 (Date) September 11 (Date, Time, Filing Office) By (TITLE) SIGNATURE(S) OF DESTOR(S) REQUESTED BY

Phyllis Langlois CSP SIGNATURE(S) OF SECURED PARTY (IES Return Copy to

MAME **ADDRESS** CITY, STATE AND ZIP

10.

Norwest Financial P. O. Box 2549

Carson City, NV 89702

(1) Filing Officer Copy — Numerical

Approved by the Secretary of State

DOUGLAS CO., NEVADA

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SUZANNE BEAUDREAU DEPUTY

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