

UNIFORM COMMERCIAL CODE — FINANCING STATEMENT CHANGE — FORM N-UCC-2

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

IMPORTANT:

Read Instructions on back before filling out form.

Receipt No. _____

1. File No. of Orig. Financing Statement 07032	1A. Date of Filing of Orig. Financing Statement 3-2-90	1B. Date of Orig. Financing Statement 3-2-90	1C. Place of Filing Orig. Financing Statement Douglas co
2. DEBTOR (As Appears on Original Financing Statement) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) KOENIG, WILLIAM JAY Jr			2A. SOCIAL SECURITY OR FEDERAL TAX NO
2B. MAILING ADDRESS (As Appears on Original Financing Statement) 1215 SLATE ROAD		2C. CITY, STATE WELLINGTON, NV	2D. ZIP CODE 89444
3. ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) KOENIG, JOHNNA			3A. SOCIAL SECURITY OR FEDERAL TAX NO
3B. MAILING ADDRESS 1215 SLATE ROAD		3C. CITY, STATE WELLINGTON, NV	3D. ZIP CODE 89444
4. ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)			4A. SOCIAL SECURITY OR FEDERAL TAX NO
4B. MAILING ADDRESS		4C. CITY, STATE	4D. ZIP CODE
5. SECURED PARTY NAME JOHN DEERE CO MAILING ADDRESS PO BOX 65090 CITY W DES MOINES STATE IA ZIP CODE 50265			5A. SOCIAL SECURITY NO FEDERAL TAX NO OR BANK TRANSIT AND A B A NO
6. ASSIGNEE OF SECURED PARTY (If Any) NAME MAILING ADDRESS CITY STATE ZIP CODE			6A. SOCIAL SECURITY NO FEDERAL TAX NO OR BANK TRANSIT AND A B A NO
7. A. <input checked="" 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 8 below. If crops or fixtures, also insert name of record owner of real estate. Effective only if submitted within 6 months prior to expiration date.			
B. <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 8 below. Release does not terminate debt.			
C. <input type="checkbox"/> ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all or part of the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 8 below.			
D. <input 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.			
E. <input type="checkbox"/> AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 8 below. (Signature of Debtor(s) and Secured Party(ies) required on all amendments.)			
8. C 4846 10-027-003-092068497-00			

THIS SPACE FOR USE OF FILING OFFICER

9. (Date) Aug 22, 1994 19__

By _____ (TITLE)

By John Deere Co K Gerdes (TITLE)
 JOHN DEERE CO K GERDES

10. This Space for Use of Filing Officer: (Date, Time, File Number and Filing Officer)

REQUESTED BY
National Filing Serv
 IN OFFICIAL RECORDS OF
 DOUGLAS CO, NEVADA

94 AUG 29 AM 11:41

11. Return Copy to:

NATIONAL FILING SERVICE, INC.
 2 CORPORATE PLACE SUITE 210
 1501 42ND STREET
 WEST DES MOINES, IA 50266-6704

Trust Account Number (If Applicable) _____

SUZANNE B. AJOREAU
 RECORDER
 \$16 PAID K2 DEPUTY
 YELLOW—Alphabetical, PINK—Acknowledgement,
 GREEN—Secured Party, BLUE—Debtor

344947
 BK 0894 PG 4992