

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

IMPORTANT: Read instruction	ons on back b	efore filling out form.			Receipt No			
1. Elle No. of Origo Elnan +-248695-491	File No. of Origo Financing Statement 1A. Date of Filing of Origo Financing Statement 1B. Date of Filing Origo Financ			of Orig. Financing 9 1-19-91	Statement 1C.	1C. Place of Filing Orig. Financing Statement DOUGLAS		
2. DEBTOR (ONE NAME LEGAL BUSINES X INDIVIDUAL (LAS	ONLY) S NAME ST NAME FIRST)	COOPER, DAVID	J.		2A	SOCIAL SECURITY OR 1111		
2B. MAILING ADDRESS		O BOX 6253		2C. CITY, STAT STATELI	NE, NV	\\\	20. ZIP COD 89449	
3. ADDITIONAL DEBTOR LEGAL BUSINES INDIVIDUAL (LA	SNAME	AME ONLY)		· · · · · · · · · · · · · · · · · · ·	3A	. SOCIAL SECURITY OR		
3B. MAILING ADDRESS	· · · · · · · · · · · · · · · · · · ·		•	3C. CITY, STAT	E	_	3D. ZIP COD	
4. ADDITIONAL DEE	TOR(S) ON ATTAC	CHED SHEET						
5. SECURED PARTY NAME MAILING ADDRESS CITY	JOHN DEI PO BOX (W DES MO		IA /	ZIP CODE	50265	. SOCIAL SECURITY NO OR BANK TRANSIT AN		
6. ASSIGNEE OF SECUR					1	. SOCIAL SECURITY NO OR BANK TRANSIT AN	. FEDERAL TAX ID A.B.A. NO.	
MAILING ADDRESS		STATE	< <	ZIP CODE))			
is cro	ps or timber, fixtur om which to be ext ation date.	iginal Financing Statement between the s, or oil, gas or minerals check here racted in Item 8 below. If crops or fin	□ and insert descr dures, also insert n	ption of real property ame of record owner	y on which growing o of real estate. Effe	or to be grown or to which a ctive only if submitted wit	affixed or to be affi thin 6 months prio	
b. belov	/. Release does n							
C. ASSI	GNMENT—The Seco ment bearing the fi	ured Party certifies that the Secured lile number shown above in the colla	Party has assigned t eral described in Ite	the Assignee above m 8 below.	e named, all or part (of the Secured Party's right	ts under the Financ	
D. XX	INATION—The Sec	cured Party certifies that the Secured	Party no longer clair	ns a security interest	under the Financing	Statement bearing the file	number shown abo	
		ncing Statement bearing the file num (Signature of Debtor(s) and Secure				y changes made to Items 2	thru 6 above must	
10-004-0 5373	002-051954	41119-00						
	SIGNATURE(S) OF DE	(Date)	-98 (mi	19 E)	- Sec.	REQUESTED BY OFFICIAL RECORDS OUGLAS CO NEVAL	art L+d	
	ERE CO NATURE(S) OF SECU RD, CLERK	Moula TYLE NAME(S)	rd "	ITLE)		JUL 16 P2:23	044455	
┌,/	ADCH METUL	Return Copy to: ORK LTD NFS DIVI	CTON	\neg	15.	LINDA SLATER RECORDER PAID PAID DE		

WEST DES MOINES, IA 50266

YELLOW—Alphabelical; PINK—Acknowledgement; GREEN—Secured Party; BLUE—Debtor.