This STATEMENT is presented to THE F	ILING OFFICER IOF III	ng for record in real (	estate records;		
1. Debtor(s) (Last Name First) and address(es)	2. Secured Party(ies) a	nd address(es)	3. For Filing Officer (I and Filing Office)		
Vinterset Care Center South, Inc.		Miriam V. Hyde 1105 West 12th Street, South		FILED HO. 1425	
714 - 14th Avenue, North	Newton, Iowa 5		8001(3	DAGE 526	
Fort Dodge, Iowa 50501	No.		Ucc Rec		
	FIG. 1		91 JAN 16	AH 10: 36	
	PAGE		1		
	<u> </u>	· · · · · · · · · · · · · · · · · · ·	MICHELLE RECO	enra	
<ul> <li>Check one only:</li> <li>Original financing statement real estate record n</li> <li>Pre-1975 fixture filing county UCC number</li> </ul>		=	MADISON CO Fee \$10	UHTY.104/A <b>).00</b>	
	rd owner of the real estate:	Winterset Care			
5. Check only one:	financing statement between				
above. is still B. PARTIAL RELEASE The secured	II effective. party releases the property		_		
C. ASSIGNMENT Except to the	file number shown above.  e extent otherwise specified on below, has been assigned				
file number  D. TERMINATION The Secured	shown above.  Party certifies that a secui ber shown above.				
E. AMENDMENT The financing ture, or addr	g statement bearing the file sess of Secured Party as indicated below []; Other, as it	cated below 🔲; Name. id	nanged to show: Name, id entity, corporate structure	entity, corporate struc- , or address of Debtor	
6. CHANGES:	<del></del>		<del></del>		
Debtor Signature(s) necessary only if filing an ame also acknowledges receipt of a copy of this instrumen	ndment; by signing Debtor it. (Debtor)		of Secured Party (See Inchovec f/k/a Mires (lowa Code 335.2)		
Type or Print all names (Iowa Code 335.2)		Date		, 19	
form Approved: (1-2-87) by: ELAINE BAXTER, Secretary of State					
1 FILING OFFICER COPY ALPHABETICAL					