This STATEMENT is presented to T	HE FILING OFFICER for filing	g pursuant to the Uniform	Commercial Code:
Debtor(s) (Last Name First) and address(es) Secured Party(s) and a	ddress(es)	For Filing Officer (Date, Time, Number, and Filing Office) FILED NO. 258 UCC Rec
Rose Acre Farms, Inc.	Whirlpool Financia	1 Corporation	
RR #5	Attn: Asset Manag	emetn Division	
Seymour, IN 47274	25 Tri-State Inter	national, Suite 200	BODK 3 PAGE 714
	Lincolnshire, IL 6	SOSS TO SETU SOSS	
·	State	RECORDED	95 JUL 31 PM 2: 34
This Statement refers to original Financian Date filed: November 23, 1987	ng Statement No. 907 book 3 pa	pe-343	HICHELLE UTSLEA RECORDER HADISON COUNTY, IOWA
A. CONTINUATION The ori	ginal financing statement bearing	the file number shown above	
B. PARTIAL RELEASE From the leases	ne collateral described in the finan	cing statement bearing the	file number shown above, the Secured Party re-
C. SIGNMENT The sec rights u	cured party certifies that the assig under the financing statement beari	nee, (name and address sho ng the file number shown ab	wn below), has been assigned the secured parties ove in the property indicated below.
D.XX FERMINATION The Secured Party certifies that a security interest no longer is claimed under the financing statement bearing the file number shown above.			
address	of Secured Party as indicated below; as indicated below;	file number is changed to sow; Name, identity, corp	show Name, identity, corporate structure, or norate structure, or address of Debtor Party as
CHANGES RECO	ADED V	5958462-1	(3282-1)
COMPA	ARED		
Debtor signature(s) necessary only if filing	an amendment:	WHJ.TRLPOOL	FINANCIAL CORPORATION
REC \$ 500	(Debtor)	By: All a	(Secured Party)
AUD O	(D. I.)	/ /	CURED PARTY.) (See instruction No. 2)
R.M.F. \$ 100	(Debtor)	TYPE OR PRINT NAME	pps_Operations Administrator 5/ (lowa Code 335.2)
Form Approved (7-1-81) By: MELVIN D. S	YNHORST, Secretary of State	Dated:	, 19
%≠			

(1) FILING OFFICER COPY-ALPHABETICAL