UCC FINANCING STATEMENT AMENDIFOLLOW INSTRUCTIONS	MENT	Book 2019 Page Date 12/20/201 Rec Amt \$12.00	4064 9 Ti	Type 17 002 P	ages 2 INDX ANNO SCAN
A. NAME & PHONE OF CONTACT AT FILER (optional) TIM J RETHMEIER		LISA SMITH, CO MADISON COUNTY	UNTY I	RECORDER	CHEK
B. E-MAIL CONTACT AT FILER (optional)  T.RETHMEIER@FMSBIOWA.COM					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
FARMERS & MERCHANTS STATE BANK 101 W JEFFERSON WINTERSET, IA 50273					
<u> </u>		THE ABOVE CDAC	E IC FOR	TIL INC OFFICE LISE ON	ı v
THE ABOVE SPACE IS FOR FILING OFFICE USE ON  INITIAL FINANCING STATEMENT FILE NUMBER  This FINANCING STATEMENT AMENDMENT is to be filed (for recorded) in the REAL ESTATE RECORDS					
UCC DATED 04-09-18, BK 2018, PG 1102 2. TERMINATION: Effectiveness of the Financing Statement identified ab		Filer: attach Amendment Addendessect to the security interest(s) of			
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or	7h, and address of Ass	ignee in item 7c and name of Ass	gnor in iter	n 9	· · · · · · · · · · · · · · · · · · ·
For partial assignment, complete items 7 and 9 and also indicate affected	collateral in item 8		= :		
4. CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	l above with respect to t	the security interest(s) of Secured	Party auth	orizing this Continuation Stat	ement is
Check the of those two boxes.	k <u>one</u> of these three box CHANGE name and/or addi tem 6a or 6b; <u>and</u> item 7a	ress: Complete ADD name	e: Complete and item 70		
6. CURRENT RECORD INFORMATION: Complete for Party Information C	hange - provide only one	name (6a or 6b)			
OR	Tripor process	1.3145	LADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
6b. INDIVIDUAL'S \$URNAME	FIRST PERSONA	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SOFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party in 7a. ORGANIZATION'S NAME	formation Change - provide on	γ <u>one</u> name (7a or 7b) (use exact, full nam	e; do not omit	, modify, or abbreviate any part of t	ne Debtor's name)
OR 75. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8. X COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	L RESTATE o	covered collateral A	SSIGN collateral
Indicate collateral: ROCKY FUNKE					
SE 1/4 NW 1/4 OF SECTION 17, TOWNSHIP 74 I	NORTH, RANGE	29 WEST, MADISON (	COUNTY	r, 10WA.	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS		· <del></del>	ame of Ass	ignor, if this is an Assignmen	t)
9a. ORGANIZATION'S NAME	vide name of authorizing	) Dentoi	·		
OR B. INDIVIDUAL'S SURNAME	FIRST PERSONA	IL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

## UCC FINANCING STATEMENT ADDENDUM **FOLLOW INSTRUCTIONS** 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME Witt FIRST PERSONAL NAME Andrew ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Ryan THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10s. ORGANIZATION'S NAME OR 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY 10c. MAILING ADDRESS CITY 11. ADDITIONAL SECURED PARTY'S NAME of ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11s or 11b) 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME STATE POSTAL CODE COUNTRY 11c. MAILING ADDRESS CITY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable) 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): 16. Description of real estate: SE 1/4 NW 1/4 of Section 17, Township 74 North, Range Rocky Funke 29 West, Madison County, Iowa

17. MISCELLANEOUS: