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UCC FINANCING STATEMENT AME	NDM	ENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

FILED NO. 002483 800K223PAGE2983

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MICKI UTSLER RECORDER MADISON COUNTY, IOWA

LexisNexis Document Solutions 801 Adlai Stevenson Drive Springfield, IL 62703		AUD \$	COMPUTER RECORDED COMPARED
L	THE ABOVE	SPACE IS FOR FILING OFFICE	USE ONLY
1a. INITIAL FINANCING STATEMENT FILE # G11163 3 797 06/15/1998 04:18:0	0	1b. This FINANCING STATES to be filed [for record] (or REAL ESTATE RECORD	recorded) in the
2. TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with respect to security interest(s) of	the Secured Party authorizing this Terr	mination Statement.
3. CONTINUATION: Effectiveness of the Financing Statement identified al continued for the additional period provided by applicable law.	pove with respect to security interest(s) of the Sec	ured Party authorizing this Continuation	on Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and	d address of assignee in item 7c; and also give nam	e of assignor in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects	Debtor or Secured Party of record. Check on	ly one of these two boxes.	
Also check one of the following three boxes and provide appropriate information is	n items 6 and/or 7.		4.87 (2.5)
CHANGE name and/or address: Please refer to the detailed instructions	DELETE name: Give record name to be deleted in item 6a or 6b.	ADD name: Complete item 7a also complete items 7e-7g (if a	a or 7b, and also item 7c;
in regards to changing the name/address of a party.	to be deleted in item 6a or 6b.	also complete items /e-/g (ira	арріісарів).
6. CURRENT RECORD INFORMATION:			<del></del>
6a. ORGANIZATION'S NAME			
OR CHANDIMBUALS LAST NAME		1	SUFFIX
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
		İ	1
7. CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
	- 1		
OR 75. INDIVIDUAL'S LAST NAME	IFIRST NAME	MIDDLE NAME	SUFFIX
75. HABIAIDONE O ENOT HAME			
		TRACTU CONT	COUNTRY
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
7d. SEE INSTRUCTIONS ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if	fany NON
8. AMENDMENT (COLLATERAL CHANGE): check only one box.		<del></del>	
Describe collateral deleted or added, or give entire restated collar	teral description, or describe collateral assign	ned.	

<ol> <li>NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS adds collateral or adds the authorizing Debtor, or if this is a Termination author</li> </ol>	rized by a Debtor, check here 🔲 and en	ter name of DEBTOR authorizing this Amendme	horized by a Debtor which ent.
9a. ORGANIZATION'S NAMEGeneral Electric Capital	l Business Asset Fund	ing Corporation	
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10.OPTIONAL FILER REFERENCE DATA106220/864-001/LKD IA-Madison County		₹ 8	5 950029-

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)

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## UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)

06/15/1998 04:18:00 797 G11163 3

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)

12a. ORGANIZATION'S NAMEGENERAL Electric Capital Business Asset

OR Funding Corporation 12b. INDIVIDUAL'S LAST NAME

13. Use this space for additional information

DEBTOR NAME Randy Berry 1983 305th Street Winterset, IA 50273 USA

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

IA-Madison County

NAME OF AUTHORIZING PARTY General Electric Capital Business Asset Funding Corpo 10900 NE 4th Street, Suite 500, Box C-97550 Bellevue, WA 98004 USA