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		Book 2017 Page 1 Date 5/04/2017 Rec Amt \$12.00	402 Type 17 002	Pages 2 I I NDX ANNO SCAN
UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS		LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA		CHEK
A. NAME & PHONE OF CONTACT AT FILER (optional)		MADISON COUNTY I	Offic	
B. E-MAIL CONTACT AT FILER (optional)				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
COMMODITY CREDIT CORPORAT 815 EAST HIGHWAY 92 WINTERSET, IA	TION 7			
L		THE AROVE SPACE	IS FOR FILING OFFICE US	E ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER	1		NT AMENDMENT is to be filed [f	
Book 2017 Page 377		Filer: attach Amendment Addend	tum (Form UCC3Ad) and provide Del	
2. TERMINATION: Effectiveness of the Financing Statement identified Statement	d above is terminated w	ith respect to the security interest(s) of Secured Party authorizing th	is Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7 For partial assignment, complete items 7 and 9 and also indicate affer			ssignor in item 9	
CONTINUATION: Effectiveness of the Financing Statement identificant continued for the additional period provided by applicable law	fied above with respect	to the security interest(s) of Secure	d Party authorizing this Continua	ition Statement is
5. PARTY INFORMATION CHANGE:	ack one of those three he	voe to		
Check one of these two boxes: This Change affects Debtor or Secured Party of record	eck <u>one</u> of these three bo CHANGE name and/or a item 6a or 6b; <u>and</u> item 7	ddress: CompleteADD name:	Complete item DELETE name	e: Give record name n item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information			Titem 70 to be deleted i	n item ba or ob
6a. ORGANIZATION'S NAME	•			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		DDITIONAL NAME(S)/INITIAL(S)	SUFFIX
HOLLINGSWORTH	EVAN	· ·	IAMES	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party [7a. ORGANIZATION'S NAME]	Information Change - provide o	nly <u>one</u> name (7a or 7b) (use exact, full name;	do not omit, modify, or abbreviate any par	t of the Debtor's name)
OR 75. INDIVIDUAL'S SURNAME				
HOLLINGSWORTH INDIVIDUAL'S FIRST PERSONAL NAME				
SAMANTHA				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
JO 7c. MAILING ADDRESS	ICITY	Is	TATE POSTAL CODE	COUNTRY
2387 Peru Road	Peru		A 50222	
8. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collateral	DELETE collateral RES	TATE covered collateral	ASSIGN collateral
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING TH	HIS AMENDMENT: Pr	ovide only <u>one</u> name (9a or 9b) (nam	e of Assignor. if this is an Assionr	nent)
If this is an Amendment authorized by a DEBTOR, check here and program of the pro	ovide name of authorizing			
OR SD. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME TAI	DDITIONAL NAME(S)/INITIAL(S)	SUFFIX
		[0]		30111
10. OPTIONAL FILER REFERENCE DATA:	•			

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UCC FINANCING STATEMENT AMENDMENT ADDENDUM **FOLLOW INSTRUCTIONS** 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form **BOOK 2017 PAGE 377** 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a ORGANIZATION'S NAME 12b. INDIVIDUAL'S SURNAME HOLLINGSWORTH FIRST PERSONAL NAME **EVAN** ADDITIONAL NAME(S)/INITIAL(S) SUFFIX **JAMES** THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit 13a. ORGANIZATION'S NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) 13b. INDIVIDUAL'S SURNAME SUFFIX 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): A) A 48ft. DIAMETER, 14 RING HIGH GRAIN BIN STIFFENED. 2 STIFFENERS PER SHEET. OVER ALL HEIGHT 50'11" EAVE HEIGHT 37' 6" 63,430 mAX bU. CAPACITY 6% COMPACTED. 61,689 MAX BU. CAPACITY WITH LOW FLOOR SUPPORTS. 4 PANEL ROOF WITH 8, 000 LB PEAK CAPACITY @ 30PSF GROUND SNOW LOAD. 2 RING DOOR ROOF, ROOF STAIRWAY, SHUR-STEP STAIRWAY. 13 RING INSIDE LADDER. 10 " POWER SWEEP WITH 10" TUBE HORIZONTAL UNLOAD. 1 24" CENTRIFUNGAL FAN 3 HP WITH 44" FAN TRANSITION. 12 ELBOW VENTS 7 BOONE TEMP CABLES. B) ALL PROCEEDS, PRODUCTS, REPLACEMENT, SUBSTITUTIONS, ADDITIONS, ACCESSIONS, AND SECURITY ACQUIRED HEREAFTER. C)- DISPOSITION OF SUCH COLLATERAL IS NOT HEREBY AUTHORIZED 15. This FINANCING STATEMENT AMENDMENT: 17. Description of real estate: covers timber to be cut covers as-extracted collateral is filed as a fixture filing 16. Name and address of a RECORD OWNER of real estate described in item 17 North One Half (1/2) of the Southwest Quarter (1/4) of (if Debtor does not have a record interest): Section Twenty (20) Township Seventy-five (75) North, Range Twenty -seven (27), West of the 5th pm, Madison County, IA

18. MISCELLANEOUS: