		Book 2023	Rage 90		
	1	Document 20 Date 4/27/ Rec Amt \$12	023 901 Typ 12023 Time	e 10 013	Pages 2 PM
UCC FINANCING STATEMENT AMEND FOLLOW INSTRUCTIONS	MENT				
A. NAME & PHONE OF CONTACT AT FILER (optional) Rylie Waite 563-927-4250		Daneen Schi DELAWARE CO		ORDER/REG	ISTRAR
B. E-MAIL CONTACT AT FILER (optional)		1			
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Commodity Credit Corporation c/o Delaware County Farm Service A	gency				
200 South 12th Street	geney				
Manchester, IA 52057	1				
		THE ABOVE SI	PACE IS FOR FILIN	G OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2018-1150		1b. This FINANCING STAT (or recorded) in the RE Filer: <u>attach</u> Amendment	AL ESTATE RECORI Addendum (Form UCC3))S Ad) and provide Debto	or's name in item 13
TERMINATION: Effectiveness of the Financing Statement identi- Statement	ified above is terminated v	vith respect to the security inte	erest(s) of Secured Pa	rty authorizing this	Termination
ASSIGNMENT (full or partial): Provide name of Assignee in iter For partial assignment, complete items 7 and 9 and also indicate a	n 7a or 7b, <u>and</u> address of	Assignee in item 7c and name	e of Assignor in Item)	
CONTINUATION: Effectiveness of the Financing Statement ide continued for the additional period provided by applicable law			ecured Party authoriz	ing this Continuation	on Statement is
5. PARTY INFORMATION CHANGE:					
Check one of these two boxes:	Check <u>one</u> of these three bo	Account to the contract of the	omo: Complete item	DELETE	
This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information	item 6a or 6b; <u>and</u> item 7	a or 7b and item 7c 7a or 7	ame: Complete item 7b, <u>and</u> item 7c	to be deleted in i	Give record name tem 6a or 6b
6a. ORGANIZATION'S NAME	tion onlinge - provide only t	me traine (oa or op)			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AI NAME	ADDITIONAL NAM	E(S)/IMITIAL (S)	SUFFIX
Goldsmith	James		Gerard	• • • • • • • • • • • • • • • • • • • •	
 CHANGED OR ADDED INFORMATION: Complete for Assignment or Pa 7a. ORGANIZATION'S NAME 	rty Information Change - provide o	nly <u>one</u> name (7a or 7b) (use exact, full	name; do not omit, modify,	or abbreviate any part of	the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME					· · · · · · · · · · · · · · · · · · ·
INDIVIDUAL'S FIRST PERSONAL NAME	<u>.</u>				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
					SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTA	CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE covered co	Allatorat .	SSIGN collateral
Indicate collateral:			THE THE COVERED OF	materia: A	SSIGN Collateral
	•				
9. NAME of SECURED PARTY of RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and	THIS AMENDMENT: Pr	ovide only <u>one</u> name (9a or 9b)	(name of Assignor, if t	his is an Assignmer	nt)
9a. ORGANIZATION'S NAME	provide name of authorizing) Deptor			
Commodity Credit Corporation 9b. INDIVIDUAL'S SURNAME	Telegan				
OD. HISTORE O GURNANIE	FIRST PERSONA	IL NAME	ADDITIONAL NAM	E(S)/INITIAL(S)	SUFFIX

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS

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Same as item 9 on Amendment form	_[
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	4		
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SUFFIX	THE ABOVE ODA	CE IS FOR EILING OFFICE	
I be of a current Debtor of record required for indext, modify, or abbreviate any part of the Debtor	xing nurnoses only in some	filing offices - see Instruction item	
			SUFFIX
James	Ge	erard	
is filed as a fixture filing and in item 17 The Nof the	Northeast Quai	onal Quarter (NE rter (NE1/4) of Sec ighty-Eight (88) N	tion Si
	o of a current Debtor of record required for inde	THE ABOVE SPA of a current Debtor of record required for indexing purposes only in some t, modify, or abbreviate any part of the Debtor's name); see Instructions if r	THE ABOVE SPACE IS FOR FILING OFFICE to of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item t, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S)