-	Book 20	23 Page	2380		
UCC FINANCING STATEMENT AMENDM FOLLOW INSTRUCTIONS	ENT	Document Date 9/2 Rec Amt \$.2/2023 T	Type 10 01 ime 10:51:0	3 Pages 2 6AM
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)	(
Mark E. White, (563) 856-2525 B. E-MAIL CONTACT AT SUBMITTER (optional)	Daneen Schindler, RECORDER/REGISTRAR DELAWARE COUNTY IOWA				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
אָעוּעָלְּאָ Fairners Savings Bank	ļ				
205 Main St. P.O. Box 127					
Colesburg, IA 52035-0127					
SEE BELOW FOR SECURED PARTY CONTACT INFOR	RMATION	THE ABOVE	SPACE IS FOR	FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER	b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS				
Book 2018, Page 2760, Pages 2, Filed 10/01/2018 at-1		Filer: attach Amendr	nent Addendum (For	m UCC3Ad) and provide	Debtor's name in
2. TERMINATION: Effectiveness of the Financing Statement identified abo	ve is terminated with res	pect to the security interest(s)	of Secured Part(y)(is	es) authorizing this Termin	nation Statement
ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and addres For partial assignment, complete items 7 and 9; check ASSIGN Collateral I					
CONTINUATION: Effectiveness of the Financing Statement identified a additional period provided by applicable law				s Continuation Statemen	t is continued for the
5. PARTY INFORMATION CHANGE:	·				
	eck one of these three bo		D name: Complete	item — DELETE name	: Give record name
This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information	CHANGE name and/or item 6a or 6b; and item		or 7b, and item 7c	to be deleted in	
6a. ORGANIZATION'S NAME	Criange - provide only on	E Hairle (da di db)			
Pine View Farms, LLC					
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSOI	NAL NAME	ADDITIONA	L NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Info	ormation Change - provide only	one name (7a or 7b) (use ekact, full o	name; do not omit, modify	, or abbreviate any part of the I	Debtor's name)
7a. ORGANIZATION'S NAME					
OR 75. INDIVIDUAL'S SURNAME		·			
Wessel					
INDIVIDUAL'S FIRST PERSONAL NAME Thomas	·				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		,			SUFFIX
Robert					
7c. MAILING ADDRESS 1111 Laser Rd.	Edge	wood	STATE P	OSTAL CODE 52042	USA
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE cove	red collateral	ASSIGN* collatera
Indicate collateral:	Check ASSIGN COLLATERAL	only if the assignee's power to amend	the record is limited to ce	rtain collateral and describe the	e collateral in Section 8
A NAME OF SECURED BARTY OF DECORD AUTHORIZING THE	S AMENIDMENT: Dec	vide only one name (Co os Oh)	(name of Assignation	f this is an Assignment)	
 NAME OF SECURED PARTY OF RECORD AUTHORIZING THI If this is an Amendment authorized by a DEBTOR, check here and provi 			maine of Assignor, I	i uno io an Mooigilineill)	
9a. ORGANIZATION'S NAME					
Farmers Savings Bank 9b. INDIVIDUAL'S SURNAME	FIRST PERSOI	NAL NAME	ADDITIONA	L NAME(S)/INITIAL(S)	SUFFIX
ON THE PROPERTY OF THE PROPERT	, into i i Endoi	w in the little	,		
10. OPTIONAL FILER REFERENCE DATA: Amend Debtor(s) to Thomas Robert Wessel & Amy An			1		- 1

FOLLOW INSTRUCTIONS 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form Book 2018, Page 2760, Pages 2, Filed 10/01/2018 at 10:41:28AM. 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME Farmers Savings Bank 12b. INDIVIDUAL'S SURNAME

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

14. ADDITIONAL SPACE FOR (CHECK ONE BOX):

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 OR 13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Wessel Ann Amy OTHER INFORMATION (Please Describe)

ITEM 8 (Collateral) OR

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 (if Debtor does not have a record interest): The NE 1/4 of the NW 1/4 of Section 11. Township 90, Range 5, all in Delaware County, Iowa. Shirley Anderegg 303 South Bell St. Edgewood, IA 52042 18. MISCELLANEOUS: Amend Debtor(s) to Thomas R. & Amy A. Wessel.