| C. SEND ACKNOWLEDGMENT TO: (Name and Address) GoodLeap, LLC PO Box # 981440 EI Paso, TX 79998- 1440 SEE BELOW PRO SECURED PARTY CONTACT INFORMATION 1s. INITIAL FINANCING STATEMENT FILE NUMBER book: 2021 page: 4012 11/16/2021 11/16/2021 15/17 This FINANCING STATEMENT AMENDMENT is to be filled flor record; for recorded in the REAL ESTATE ECORDS. File: attack Amendment Add (For recorded) in the REAL ESTATE ECORDS. File: attack Amendment Add (For recorded) in the REAL ESTATE ECORDS. File: attack Amendment Add (For recorded) in the REAL ESTATE ECORDS. File: attack Amendment Add (For recorded) in the REAL ESTATE ECORDS. File: attack Amendment Add (For recorded) in the REAL ESTATE ECORDS. File: attack Amendment Add (For recorded) in the REAL ESTATE ECORDS. File: attack Amendment Add (For recorded) in the REAL ESTATE ECORDS. File: attack Amendment Add (For recorded) in the REAL ESTATE ECORDS. File: attack Amendment Add (For recorded) in the REAL ESTATE ECORDS. File: attack Amendment Add (For recorded) in the REAL ESTATE ECORDS. File: attack Amendment Add (For recorded) in the REAL ESTATE EXPONSION CONTINUED AND AMENDMENT AMENDMENT IN the Part Amendment Add (For recorded) in the REAL ESTATE EXPONSION CONTINUED AND AMENDMENT IN THE AMENDMENT IN TH | | | | | | | | | | | | |
|--|-------------|--|--|--|--|--|--|--|--|--|--|--|
| B. EMAIL CONTACT AT SUBMITTER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) GoodLeap, LLC PO Box # 981440 EI Paso, TX 79998- 1440 SEE BELOW FOR SECURED PARTY CONTACT INFORMATION 1a. INITIAL FINANCING STATEMENT FILE NUMBER book: 2021 page: 4012 11/16/2021 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE NUMBER book: 2021 page: 4012 11/16/2021 TERMINATION: Effectiveness of the Financing Statement Identified above is terminated with report to the security interest(s) of Secured Party)(flee) authorizing this Termination Statement Identified above with respect to the security interest(s) of Secured Party)(flee) authorizing this Termination Statement is continued approached before the security interest(s) of Secured Party) (flee) authorizing this Termination Statement is continued approached before the security interest(s) of Secured Party) (flee) authorizing this Termination Statement is continued approached before the security interest(s) of Secured Party authorizing this Continued ion Statement is continued approached party of secured Party authorizing this Continued ion Statement is continued in Statement in Statement is continued approached party authorizing this Continued ion Statement is continued approached party authorizing this Continued ion Statement is continued approached party authorizing this Continued ion Statement is continued approached party authorizing this Continued ion Statement is continued and security interest(s) of Secured Party authorizing this Continued ion Statement is continued and security interest(s) of Secured Party authorizing this Continued ion Statement is continued and security interest(s) of Secured Party authorizing this Continued ion Statement is continued in Statement in Statement in Statement is continued in Statement in Stat | ا ا ا | JCC FINANCING STATEMENT FOLLOW INSTRUCTIONS | Document 2 Date 10/12 | 2 <mark>023 25</mark> 50 2/2023 T | Tune 10 01 | 3 Pages 39PM | | | | | | |
| B. EMAIL CONTACT AT SUBMITTER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) GoodLeap, LLC PO Box # 981440 EI Paso, TX 79998- 1440 SEE BELOW FOR SECURED PARTY CONTACT INFORMATION 1a. INITIAL FINANCING STATEMENT FILE NUMBER book: 2021 page: 4012 11/16/2021 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE NUMBER book: 2021 page: 4012 11/16/2021 TERMINATION: Effectiveness of the Financing Statement Identified above is terminated with report to the security interest(s) of Secured Party)(flee) authorizing this Termination Statement Identified above with respect to the security interest(s) of Secured Party)(flee) authorizing this Termination Statement is continued approached before the security interest(s) of Secured Party) (flee) authorizing this Termination Statement is continued approached before the security interest(s) of Secured Party) (flee) authorizing this Termination Statement is continued approached before the security interest(s) of Secured Party authorizing this Continued ion Statement is continued approached party of secured Party authorizing this Continued ion Statement is continued in Statement in Statement is continued approached party authorizing this Continued ion Statement is continued approached party authorizing this Continued ion Statement is continued approached party authorizing this Continued ion Statement is continued approached party authorizing this Continued ion Statement is continued and security interest(s) of Secured Party authorizing this Continued ion Statement is continued and security interest(s) of Secured Party authorizing this Continued ion Statement is continued and security interest(s) of Secured Party authorizing this Continued ion Statement is continued in Statement in Statement in Statement is continued in Statement in Stat | F | A. NAME & PHONE OF CONTACT AT SUBMITTE | R (optional) | | | | | | | | | |
| GoodLeap, LLC PO Box # 981440 EI Paso, TX 79998-1440 3. INITIAL FINANCING STATEMENT FILE NUMBER book: 2021 page: 4012 11/16/2021 1. INITIAL FINANCING STATEMENT FILE NUMBER book: 2021 page: 4012 11/16/2021 2. ITEMINATION: Effectiveness of the Financing Statement Identified above is terminated with respect to the security interest(s) of Secured Party()(s) authorizing this Termination Statement additional period provided by applicable law 4. CONTINUATION: Effectiveness of the Financing Statement Identified above with respect to the security interest(s) of Secured Party()(s) authorizing this Termination Statement Identified above with respect to the security interest(s) of Secured Party()(s) authorizing this Termination Statement Identified above with respect to the security interest(s) of Secured Party()(s) authorizing this Termination Statement Identified above with respect to the security interest(s) of Secured Party suthorizing this Continuation Statement Identified above with respect to the security interest(s) of Secured Party suthorizing this Continuation Statement Identified above with respect to the security interest(s) of Secured Party suthorizing this Continuation Statement Identified above with respect to the security interest(s) of Secured Party suthorizing this Continuation Statement Identified above with respect to the security interest(s) of Secured Party suthorizing this Continuation Statement Identified above with respect to the security interest(s) of Secured Party suthorizing this Continuation Statement Identified above with respect to the security interest(s) of Secured Party suthorizing this Continuation Statement Identified above with respect to the security interest(s) of Secured Party suthorizing this Continuation Statement Identified above with respect to the security interest(s) of Secured Party suthorizing this Continuation Statement Identified above with respect to the security interest(s) of Secured Party suthorizing this Termination Statement Identified above with respect to the s | L | B. E-MAIL CONTACT AT SUBMITTER (optional) | Daneen Scl DELAWARE | Daneen Schindler, RECORDER/REGISTRAR DELAWARE COUNTY IOWA | | | | | | | | |
| PO Box # 981440 EI Paso, TX 79998-1440 SEE BELOW FOR SECURED PARTY CONTACT INFORMATION 1a. INITIAL FINANCING STATEMENT FILE NUMBER book: 2021 page: 4012 11/16/2021 2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party(/(ss) authorizing this Termination Statement additional period provided by applicable law 4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party(/(ss) authorizing this Termination Statement additional period provided by applicable law 5. PARTY INFORMATION CHANGE: Check gag of these two boxes: This Change affects Debtor og Secured Party of record Secured Party authorizing this Continuation Statement is continuation Statement is continuation period provided by applicable law 5. PARTY INFORMATION CHANGE: This Change of these two boxes: This Change affects Debtor og Secured Party of record Change of these three boxes to: AND Check gag of these three boxes to: This Change affects Debtor og Secured Party of record Change of these three boxes to: AND Check gag of these three boxes to: This Change affects Debtor og Secured Party of record Change of these three boxes to: AND Check gag of these three boxes to: This Change affects Debtor og Secured Party of record Change of these three boxes to: AND Check gag of these three boxes to: This Change affects Debtor og Secured Party of record Change of these three boxes to: AND Check gag of these three boxes to: This Change of these two boxes: This Change of these three boxes to: This Change of these three boxes to: AND Office of the affective of the office of the office of the offic | <u> </u> | C. SEND ACKNOWLEDGMENT TO: (Name and A | Address) | <u> </u> | | | | | | | | |
| EI PASO, TX 79998-1440 SEE BELOW FOR SECURED PARTY CONTACT INFORMATION 1a. INTIAL FINANCING STATEMENT FILE NUMBER book: 2021 page: 4012 11/16/2021 LIDER THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INTIAL FINANCING STATEMENT AMENDMENT is to be litted flor record (or recorded) in the FIEAL ESTATE ECORDOS. Filer: affaith Amendment Add Amendment Add Crom UCC3Ad) and provide Debtor's name in them 13. 2. TERMINATION: Effectiveness of the Financing Statement Identified above is terminated with respect to the security Interest(s) of Secured Party (see) authorizing this Termination State of Party authorizing the Party authorizing the Continuation Statement Identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continuadditional period provided by applicable law 5. PARTY INFORMATION CHANGE: Check aga of these two boxes: This Change affects Debtor or Secured Party of record CHANGE rame and/or address: Complete Imm DELETE name: Give record CHANGE rame and/or address: Complete Imm DELETE name: Give record Delete or Party Information Change - provide only one name (fa or 7b) (are east, full name; do not one, modify, or abbreviate any part of the Debtor's name InDIVIDUAL'S SURNAME INDIVIDU | ١ | GoodLeap, LLC | | 7 | | | | | | | | |
| 1a. INITIAL FINANCING STATEMENT FILE NUMBER book: 2021 page: 4012 11/16/2021 2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Part(y/(leg) authorizing this Termination Statement and Statement identified above is terminated with respect to the security interest(s) of Secured Part(y/(leg) authorizing this Termination Statement identified above in term 7a and name of Assignor in item 9 For partial assignment, complete terms 7 and 9c, check ASSIGN Collateral box in Item 8 and describe the affected collateral in item 8 4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Part(y/(leg) authorizing this Continuation Statement additional period provided by applicable law 5. PARTY INFORMATION CHANGE: Check ang of these two boxes: AND Check ang of these two boxes: AND Check ang of these two boxes: This Change affects Debtor or Secured Party of record Litem 6a or 6b; and ferm 7a or 7b and ferm 7c 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only ang name (6a or 6b) 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFF 7c. MAILING ADDRESS COLLATERAL CHANGE: Check only ang box: ADD collateral Delete collateral RESTATE covered collateral ASSIGN* | | | | | | | | | | | | |
| TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Part(y)(iss) authorizing this Termination State 3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assigner in item 9 For partial assignment, complete times 7 and 9; check ASSIGN Collateral box in Item 8 and describe the affected collateral in item 8 4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continuation additional period provided by applicable law 5. PARTY INFORMATION: CHANGE: Check and of these two boxes: This Change affects before your provided by applicable law 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only gan name (6a or 6b) 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only gan name (7a or 7b) (see east, full name, do not only, or abbreviate any part of the Debtor's name 7a. ORGANIZATION'S NAME Boyd 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only gan name (7a or 7b) (see east, full name, do not only, or abbreviate any part of the Debtor's name 7a. ORGANIZATION'S NAME INDIVIDUAL'S SURNAME INDIVIDUAL'S SURNAME INDIVIDUAL'S SURNAME INDIVIDUAL'S SURNAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 8. COLLATERAL CHANGE: Check only gan box: ADD collateral DELETE collateral DELETE collateral RESTATE Covered collateral ASSIGN* | 1 | SEE BELOW FOR SECURED PARTY | CONTACT INFORMATION | THE ABOVE | SPACE IS FO | R FILING OFFICE L | JSE ONLY | | | | | |
| 3. ASSIGNMENT: Provide name of Assignee in item 7 a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9; check ASSIGN Collateral box in item 8 and describe the affected collateral in item 8 4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continual additional period provided by applicable law 5. PARTY INFORMATION CHANGE: Check and of these two boxes: This Change affects Debtor or Secured Party of record CHANGE name and/or address. Complete This Change affects Debtor or Secured Party of record Item 8 or 6b; and item 7a or 7b and item 7c To and item 7c 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only gap name (8a or 6b) 8a. ORGANIZATION'S NAME OR 8b. INDIVIDUAL'S SURNAME Boyd 7c. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only gap name (7a or 7b) (use exact, full name, do not onit, modify, or abbreviate any part of the Debtor's name 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S SURNAME INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFF 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTINUE ASSIGN* ASSIGN* | ŀ | pook: 2021 page: 4012 11/1 | | (Form UCC3Ad) and | provide Debtor's | name in item 13. | | | | | | |
| For partial assignment, complete items 7 and 9; check ASSIGN Collateral box in Item 8 and describe the affected collateral in Item 8 4. | 2 | 2. TERMINATION: Effectiveness of the Financing St | atement identified above is termin | nated with respect to the security interest(s) | of Secured Part(y |)(ies) authorizing this Te | ermination Statem | | | | | |
| 5. PARTY INFORMATION CHANGE: Check ging of these two boxes: This Change affects Debtor gr Secured Party of record Item 6a or 6b; and item 7a or 7b and item 7c ar 7b, and item 7c to be deleted in item 6a or 6b; and item 7a or 7b, | 3 | ASSIGNMENT: Provide name of Assignee in item For partial assignment, complete items 7 and 9; chec | n 7a or 7b, and address of Assignatic ASSIGN Collateral box in Item | ee in item 7c <u>and</u> name of Assignor in item 9 8 and describe the affected collateral in iten |) 18 | | | | | | | |
| Check one of these two boxes: This Change affects Debtor or Secured Party of record Item fac or 6b; and filem 7a or 7b and item 7c Ta or 7b, and item 7c to be deleted in item 6a or 6b; and filem 7a or 7b and item 7c Ta or 7b, and item 7c to be deleted in item 6a or 6b. Sa. ORGANIZATION'S NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFF | 4 | | Statement identified above with re | espect to the security interest(s) of Secured | Party authorizing | this Continuation State | ment is continued | | | | | |
| This Change affects Debtor or Secured Party of record Item 6a or 6b; and item 7a or 7b and item 7c 7b and item 7c 7a or 7b and item 7c 7b and item 7c 7a or 7b and item 7c 7b and item 7c 7a or 7b and item 7c | 5 | AND Chark are of these three haves to: | | | | | | | | | | |
| 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (Sa or 6b) 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME Boyd 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Deb | | Check big bit these two boxes. Complete item propELETE name: Give record | | | | | | | | | | |
| Boyd 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only gas name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFF 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTY 8. COLLATERAL CHANGE: Check only gas box: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN* | | | CHANGE | name and/or address: Complete AD | | | | | | | | |
| 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name (7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFF 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTY 8. COLLATERAL CHANGE: Check only one box: ASSIGN* | " 6 | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete | of record CHANGE item 6a or | name and/or address: Complete 6b; <u>and</u> item 7a or 7b <u>and</u> item 7c | | | | | | | | |
| Ta. ORGANIZATION'S NAME The individual's surname Individual's first personal name Individual's additional name(s)/initial(s) To. Mailing address City State Postal code Countered C | | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME | of record CHANGE item 6a or for Party Information Change - pr | name and/or address: Complete 6b; <u>and</u> item 7a or 7b <u>and</u> item 7c ovide only <u>one</u> name (6a or 6b) | or 7b, <u>and</u> item 7 | c to be delet | ed in item 6a or 6 | | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUN 8. COLLATERAL CHANGE: Check only one box: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN* | c | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME Boyd | of record CHANGE item 6a or for Party Information Change - pr | name and/or address: Complete 6b; and item 7a or 7b and item 7c 7a ovide only one name (6a or 6b) RST PERSONAL NAME | or 7b, and item 7 | c to be delet | ed in item 6a or 6 | | | | | |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUN 8. COLLATERAL CHANGE: Check only one box: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN® | c | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME Boyd CHANGED OR ADDED INFORMATION: Complete | of record CHANGE item 6a or for Party Information Change - pr | name and/or address: Complete 6b; and item 7a or 7b and item 7c 7a ovide only one name (6a or 6b) RST PERSONAL NAME | or 7b, and item 7 | c to be delet | ed in item 6a or 6 | | | | | |
| 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUN 8. COLLATERAL CHANGE: Check only one box: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN* | 7 | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME Boyd 7. CHANGED OR ADDED INFORMATION: Complete 7a. ORGANIZATION'S NAME | of record CHANGE item 6a or for Party Information Change - pr | name and/or address: Complete 6b; and item 7a or 7b and item 7c 7a ovide only one name (6a or 6b) RST PERSONAL NAME | or 7b, and item 7 | c to be delet | ed in item 6a or 6 | | | | | |
| 8. COLLATERAL CHANGE: Check only one box: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN* | 7 | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME Boyd 7. CHANGED OR ADDED INFORMATION: Complete 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME | of record CHANGE item 6a or for Party Information Change - pr | name and/or address: Complete 6b; and item 7a or 7b and item 7c 7a ovide only one name (6a or 6b) RST PERSONAL NAME | or 7b, and item 7 | c to be delet | ed in item 6a or 6 | | | | | |
| | 7 | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME Boyd 7. CHANGED OR ADDED INFORMATION: Complete 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME | of record CHANGE item 6a or for Party Information Change - pr | name and/or address: Complete 6b; and item 7a or 7b and item 7c 7a ovide only one name (6a or 6b) RST PERSONAL NAME | or 7b, and item 7 | c to be delet | ed in item 6a or 6 | | | | | |
| | 7 0 | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME Boyd C. CHANGED OR ADDED INFORMATION: Complete 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | of record CHANGE item 6a or for Party Information Change - professional for Party Information Change for Assignment or Party Information Change Chang | name and/or address: Complete 6b; and item 7a or 7b and item 7c ovide only one name (6a or 6b) RST PERSONAL NAME ames ge - provide only one name (7a or 7b) (use exact, full or 7b) | ADDITIO | c | ed in item 6a or 6 | | | | | |
| Indicate collateral: *Check ASSIGN COLLATERAL only if the assignee's power to amend the record is limited to certain collateral and describe the collateral in the collateral | 7 C | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME Boyd 7. CHANGED OR ADDED INFORMATION: Complete 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS | of record CHANGE item 6a or for Party Information Change - professional for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Party Information Change item 6a | name and/or address: Complete 6b; and item 7a or 7b and item 7c ovide only one name (6a or 6b) RST PERSONAL NAME ames ge - provide only one name (7a or 7b) (use exact, full in the following of the following only one name) | ADDITIO | cto be delete NAL NAME(S)/INITIAL(s dify, or abbreviate any part of | S) SUFFIX (the Debtor's name) SUFFIX COUNT | | | | | |
| | 7 C | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME Boyd 7. CHANGED OR ADDED INFORMATION: Complete 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS | of record CHANGE item 6a or for Party Information Change - professional for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Party Information Change item 6a | name and/or address: Complete 6b; and item 7a or 7b and item 7c ovide only one name (6a or 6b) RST PERSONAL NAME ames ge - provide only one name (7a or 7b) (use exact, full or 7c) TY | ADDITIO | NAL NAME(S)/INITIAL(s) Indify, or abbreviate any part of | SUFFIX SUFFIX SUFFIX COUNT ASSIGN® co | | | | | |
| | 7 C | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME Boyd C. CHANGED OR ADDED INFORMATION: Complete 7a. ORGANIZATION'S NAME The INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) To MAILING ADDRESS COLLATERAL CHANGE: Check only one both controls and controls an | of record CHANGE item 6a or for Party Information Change - professional for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Party Information Change item 6a | name and/or address: Complete 6b; and item 7a or 7b and item 7c ovide only one name (6a or 6b) RST PERSONAL NAME ames ge - provide only one name (7a or 7b) (use exact, full or 7c) TY | ADDITIO | NAL NAME(S)/INITIAL(s) Indify, or abbreviate any part of | S) SUFFIX (the Debtor's name) SUFFIX COUNT | | | | | |
| | 7 C | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME Boyd C. CHANGED OR ADDED INFORMATION: Complete 7a. ORGANIZATION'S NAME The INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) To MAILING ADDRESS COLLATERAL CHANGE: Check only one both controls and controls an | of record CHANGE item 6a or for Party Information Change - professional for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Party Information Change item 6a | name and/or address: Complete 6b; and item 7a or 7b and item 7c ovide only one name (6a or 6b) RST PERSONAL NAME ames ge - provide only one name (7a or 7b) (use exact, full or 7c) TY | ADDITIO | NAL NAME(S)/INITIAL(s) Indify, or abbreviate any part of | S) SUFFIX (the Debtor's name) SUFFIX COUNT | | | | | |
| | 7 C | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME Boyd C. CHANGED OR ADDED INFORMATION: Complete 7a. ORGANIZATION'S NAME The INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) To MAILING ADDRESS COLLATERAL CHANGE: Check only one both controls and controls an | of record CHANGE item 6a or for Party Information Change - professional for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Party Information Change item 6a | name and/or address: Complete 6b; and item 7a or 7b and item 7c ovide only one name (6a or 6b) RST PERSONAL NAME ames ge - provide only one name (7a or 7b) (use exact, full or 7c) TY | ADDITIO | NAL NAME(S)/INITIAL(s) Indify, or abbreviate any part of | S) SUFFIX (the Debtor's name) SUFFIX COUNT | | | | | |
| O. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT. | 7 0 7 8 | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME Boyd 7. CHANGED OR ADDED INFORMATION: Complete 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 3. COLLATERAL CHANGE: Check only one bound indicate collateral: | of record CHANGE item 6a or for Party Information Change - professional for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Assignment or Party Information Change item 6a or for Party Information Change item 6a | name and/or address: Complete 6b; and item 7a or 7b and item 7c ovide only one name (6a or 6b) RST PERSONAL NAME ames ge - provide only one name (7a or 7b) (use exact, full or 7c) TY Internal DELETE collateral or 7c) Internal Collateral only if the assignee's power to amend | ADDITION ADDITION ADDITION Name; do not omit, mo | NAL NAME(S)/INITIAL(s) Indify, or abbreviate any part of the part | SUFFIX (the Debtor's name) SUFFIX COUNT COUNT ASSIGN* co | | | | | |
| 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor | 7 0 7 8 | This Change affects Debtor or Secured Party of CURRENT RECORD INFORMATION: Complete 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME BOYD OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S SURNAME INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) OR MAILING ADDRESS OR COLLATERAL CHANGE: Check only one book indicate collateral: | of record CHANGE item 6a or for Party Information Change - profession of the profess | name and/or address: Complete 6b; and item 7a or 7b and item 7c ovide only one name (6a or 6b) RST PERSONAL NAME ames ge - provide only one name (7a or 7b) (use exact, full of the following of the assignee's power to amend of the following of the assignee's power to amend of the following of the assignee's power to amend of the following of the assignee's power to amend of the following of the assignee's power to amend of the following of the assignee's power to amend of the following of the | ADDITION ADDITION ADDITION Name; do not omit, mo | NAL NAME(S)/INITIAL(s) Indify, or abbreviate any part of the part | SUFFIX (the Debtor's name) SUFFIX COUNT COUNT ASSIGN* co | | | | | |
| If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME | 7 0 7 8 | This Change affects Debtor or Secured Party of Secured Pa | of record CHANGE item 6a or for Party Information Change - profession of the profess | name and/or address: Complete 6b; and item 7a or 7b and item 7c ovide only one name (6a or 6b) RST PERSONAL NAME ames ge - provide only one name (7a or 7b) (use exact, full of the following of the assignee's power to amend of the following of the assignee's power to amend of the following of the assignee's power to amend of the following of the assignee's power to amend of the following of the assignee's power to amend of the following of the assignee's power to amend of the following of the | ADDITION ADDITION ADDITION Name; do not omit, mo | NAL NAME(S)/INITIAL(s) Indify, or abbreviate any part of the part | SUFFIX (the Debtor's name) SUFFIX COUNT COUNT ASSIGN* co | | | | | |
| If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME GoodLeap, LLC | 7 0 7 8 | This Change affects Debtor or Secured Party of Secured Pa | of record CHANGE item 6a or for Party Information Change - profession of the Party Information Change - profession Change | name and/or address: Complete 6b; and item 7a or 7b and item 7c ovide only one name (6a or 6b) RST PERSONAL NAME armes ge - provide only one name (7a or 7b) (use exact, full in the content of the con | ADDITION ADD | NAL NAME(S)/INITIAL(s) MAL NAME(S)/INITIAL(s) Mify, or abbreviate any part of the series of the se | SUFFIX SUFFIX COUNT COUN | | | | | |

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS

| 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same book: 2021 page: 4012 11/16/2021 | | | | | |
|---|---|-----------------|-------------------------|-------------------------------|--------------|
| 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Sa | ame as item 9 on Amendment form | | | | |
| 12a. ORGANIZATION'S NAME | and do tem o on the lament form | | | | |
| • | | | | | |
| GoodLeap, LLC | | | | | |
| | | | | | |
| OR | | | | | |
| 12b. INDIVIDUAL'S SURNAME | | | | | |
| | | | | | |
| FIRST PERSONAL NAME | | | | | |
| | | | | | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFF | ΙX | | | |
| | | | | PACE IS FOR FILING OFFICE U | |
| 13. Name of DEBTOR on related financing statement (Name of | | | | | Provide only |
| one Debtor name (13a or 13b) (use exact, full name; do not omit, n | nodify, or abbreviate any part of the Del | otor's name); s | see Instructions if nar | ne does not fit | |
| 13a. ORGANIZATION'S NAME | | | •• | | |
| OR | | | | | |
| 136. INDIVIDUAL'S SURNAME | FIRST PERSONAL | NAME | · · · · / | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| Boyd | James | | | | |
| 14. ADDITIONAL SPACE FOR (CHECK ONE BOX): | ITEM 8 (Collateral) OR | OTHER | RINFORMATION | (Please Describe) | |
| | | | | | |
| 15. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut | is filed as a fixture filing | Description of | | | |
| 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): James Boyd | | | e Dr, MANCI | HESTER, IA, 52057-136 | 04 |
| ÷ | | | ' DELAWAI | RE . | |
| | | APN | 63029400 | 1300 | |
| | | | UNGS SUI | 3 W 1/2 LOT 5 & ALL L | OT 6 |
| | | | | | |
| 18. MISCELLANEOUS: | · | | | | - |