UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS		Recorded: 10/21, County Recordin Iowa E-Filing Fee Combined Fee: \$ Revenue Tax: \$0. Delaware County Daneen Schindle BK: 2024 PG: 266	g Fee: : \$3.0 20.00 00 /, lowa r REC	\$17.00 0	1
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)	12) 040 6427				
Danielle Spiewak (2) B. E-MAIL CONTACT AT SUBMITTER (optional)	12) 940-6427				
``'					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
National UCC, Inc.					
450 Lexington Ave #392	ا\$2ين				
New York, NY 10163-0392  www.NationalUCC.com	c110-17				
SEE BELOW FOR SECURED PARTY CONTACT INFORM	F>1e				
	IATION			R FILING OFFICE USE	
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact ful not fit in line 1b, leave all of item 1 blank, check here		fy, or abbreviate any part of the D tor information in item 10 of the F			
1a. ORGANIZATION'S NAME AGNL BLIZZARD, L.L.C.					· · · · · · · · · · · · · · · · · · ·
OR 15 INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	-				
1c. MAILING ADDRESS C/o TPG Angelo Gordon., 245 Park Avenue, 24th Floor	New York		STATE NY	POSTAL CODE 10167	COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, ful					
notifit in line 2b. leave all of item 2 blank, check here and i	provide the Individual Deb	tor information in item 10 of the F	inancing S	tatement Addendum (Form U	CC1Ad)
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	
On MALLING ADDOCCOS	louris.			TOOCTAL CODE	COUNTRY
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC	LURED PARTY): Provide	only one Secured Party name (3)	a or 3b)		
3a. ORGANIZATION'S NAME					
BANK OF MONTREAL, A CANADIAN CH					
36. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
151 West 42nd Street	New York		NY	10036	US
4. COLLATERAL: This financing statement covers the following collateral					• , , , , , , , ,
All assets of Debtor, whether now owned or are to become fixtures on the real property de	•	_		limitation, goods	s that are or

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	being administered by a Decedent's Personal Representative			
6a, Check colly if applicable and check only one box	6b, Check only if applicable and check only one box:			
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing			
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buye	er Bailee/Bailor Licensee/Licensor			
8. OPTIONAL FILER REFERENCE DATA: Filed with: Delaware County, OI (382255.00178)				

UCC FINANCING STATEMENT ADDENDUM **FOLLOW INSTRUCTIONS** 9, NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME AGNL BLIZZARD, L.L.C. 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME OR 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS POSTAL CODE COUNTRY CITY ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a, ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral) i. XX This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): All assets of Debtor, whether now owned or hereafter acquired, including, without limitation, goods that are or are to become fixtures on the real property described on Exhibit A attached hereto.

17, MISCELLANEOUS:

## **EXHIBIT A**

## LEGAL DESCRIPTION

## Parcel 1:

Parcel P in the Southwest Quarter of the Southeast Quarter of Section 32, Township 89 North, Range 5 West of the 5th Principal Meridian, City of Manchester, Delaware County, Iowa, according to plat filed in Book 2004, Page 4504, being a part of Lots 12 and 13 of the Subdivision of the East Three-Fourths of the South One-Half of said Section 32.

## Parcel 2:

Lot 2 of Lot 13 of the Subdivision of the East Three-Fourths of the South One-Half of Section 32, Township 89 North, Range 5 West of the Fifth Principal Meridian, Delaware County, Iowa, according to the plat filed in Book 2 Plats, Page 96 1/2 in the Office of the Recorder, Delaware County, Iowa; except that portion deeded to the City of Manchester by Quit Claim Deed filed in Book 125 of LD, Page 322 in the Office of the Recorder, Delaware County, Iowa; and further excepting that portion deeded to the State of Iowa filed in Book 91 of LD, Page 403 in the Office of the Recorder, Delaware County, Iowa.