UCC FINANCING STATEMENT AMENDMI FOLLOW INSTRUCTIONS  A. NAME & PHONE OF CONTACT AT FILER (optional) Chelsie Sperfslage 563-245-2522 B. E-MAIL CONTACT AT FILER (optional) service@freedombnk.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)	ENT	County Recor Iowa E-Filing Combined Fe Revenue Tax: Delaware Cou	e: \$15.00 \$0.00 unty, Iowa udler RECORDER	) PM
FREEDOMBANK PO BOX 830 ELKADER, IA 52043  1a. INITIAL FINANCING STATEMENT FILE NUMBER Book 2023 Page 2821				ord)
2. X TERMINATION: Effectiveness of the Financing Statement identified above Statement	is terminated with	respect to the security interest(s) of Sec	cured Party authorizing this Termina	tion
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, For partial assignment, complete items 7 and 9 and also indicate affected col		signee in item 7c <u>and</u> name of Assignor	in item 9	
CONTINUATION: Effectiveness of the Financing Statement identified ab continued for the additional period provided by applicable law	pove with respect to	the security interest(s) of Secured Party	y authorizing this Continuation State	ment is
Check one of these two boxes.		idress: Complete ADD name: Co 7a or 7b and item 7c 7a or 7b, and i		
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON		DITIONAL NAME(S)/INITIAL(S)	SUFFIX
Dahling	INIGERIES	V } V	at vitt	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform	nation Change - provide o	mly <u>one</u> name (7a or 7b) (use exact, full name; do r	ot omit, modify, ar abbreviate any part of th	Debtor's name)
	t nation Change - provide o	ntly <u>ane</u> namo (7a or 7b) (uso exact, fell name; do r	ot omit, modify, or abbreviate any part of th	e Debtor's name)
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform	nation Change - provide o	nly <u>ane</u> name (7a or 7b) (use exact, fell name; do r	ot emit, modify, ar abbreviate any part of th	e Debtor's name)
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform 7a. ORGANIZATION'S NAME	nation Change - provide o	nly <u>ane</u> name (7a or 7b) (use exact, fell name; do r	ot omit, modify, ar abbreviate any part of th	e Debtor's name)
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME	nation Change - provide o	nly <u>one</u> name (7a or 7b) (use exact, full name; do r	ot omit, modify, or abbreviate any part of th	e Debtor's name)
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform 7a. ORGANIZATION'S NAME  OR 7b. INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			net emit, modify, or abbreviate any part of the	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform 7a. ORGANIZATION'S NAME  OR 7b. INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME	CITY			SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform 7a. ORGANIZATION'S NAME  OR 7b. INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  7c. MAILING ADDRESS		STA	ATE POSTAL CODE	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform 7a. ORGANIZATION'S NAME  OR 7b. INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  7c. MAILING ADDRESS  8. COLLATERAL CHANGE: Also check one of these four boxes: A Indicate collateral:	CITY ADD collateral	DELETE collateral REST	ATE POSTAL CODE  ATE covered collateral AS	SUFFIX COUNTRY SSIGN collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform 7. ORGANIZATION'S NAME  OR 7. INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  7. MAILING ADDRESS  8. COLLATERAL CHANGE: Also check one of these four boxes: A Indicate collateral:  9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS A If this is an Amendment authorized by a DEBTOR, check here and provide 9a. ORGANIZATION'S NAME  FreedomBank	CITY ADD collateral  MENDMENT: Pe name of authorizing	DELETE collateral REST  rovide only <u>one</u> name (9a or 9b) (name only <u>one</u> positions of the provide only one of the provide one	ATE POSTAL CODE  ATE covered collateral AS	SUFFIX COUNTRY SSIGN collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform 7a. ORGANIZATION'S NAME  OR 7b. INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  7c. MAILING ADDRESS  8. COLLATERAL CHANGE: Also check one of these four boxes: A Indicate collateral:  9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS A If this is an Amendment authorized by a DEBTOR, check here and provide 9a. ORGANIZATION'S NAME  Freedom Bank	CITY ADD collateral	DELETE collateral REST  rovide only <u>one</u> name (9a or 9b) (name only <u>one</u> positions of the provide only one of the provide one	ATE POSTAL CODE  ATE covered collateral AS	SUFFIX COUNTRY SSIGN collateral

## **UCC FINANCING STATEMENT AMENDMENT. ADDENDUM FOLLOW INSTRUCTIONS** 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1s on Amendment form Book 2023 Page 2821 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME FreedomBank 12b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) 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 filling 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 13b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME Marvin Matthew Dahling 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): ADDITIONAL DEBTOR NAME: JULIE ANNE DAHLING 17. Description of real estate: 15. This FINANCING STATEMENT AMENDMENT: The goods are or are to become fixtures on: covers timber to be cut covers as-extracted collateral is filed as a fixture filing Leasehold interest in property located at 25913 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Fixtures: Beverly L. Schneider 206th Avenue, Manchester, IA 52057, being a cabin on leased land owned by the Beverly L. Schneider Declaration of Trust. Southwest Quarter (SW 1/4) of the Southeast Quarter (SE 1/4) of Section Twenty-three (23), Township Eighty-Eight (88) North, Range Five (5), West of the Fifth P.M.; Parcel ID # 000250230100319.

18. MISCELLANEOUS: