W INSTRUCTION WE & PHONE OF GELA KONE	IG STATEMENT AME NS (front and back) CAREFULLY CONTACT AT FILER [optional] ECK 402 778-1344 KGMENT TO: (Name and Address)		101	REG OF DEA	NEBRASKA) F HALL)	
	STROADS BANK, INC. DODGE RD NE 68118		2	00808	858	
1a. INITIAL FINANCING ST. Instument #02 2. TERMINATION: 8	200400686	nt identified above is terminated with resp		1b. This Fi	FILING OFFICE USE INANCING STATEMENT ided [for record] (or recor ESTATE RECORDS. authorizing this Terminati	AMENDMEN ded) in the
5. AMENDMENT (PART Also check one of the foll CHANGE name and/o in regards to changing 6. CURRENT RECORD I 6a. ORGANIZATION'S	TY INFORMATION): This Amendment owing three boxes and provide approprior address: Please refer to the detailed instruction ame/address of a party. NFORMATION: NAME	iate information in items 6 and/or 7.	Party of record. Check of Give record name	nly <u>one</u> of these two		, and also item 7 able).
7. CHANGED (NEW) OR	ADDED INFORMATION:	FIRST NAME		MIDDLE NA	ME	SUFFIX
7b. INDIVIDUAL'S LAS	IT NAME	FIRST NAME		MIDDLE NA		SUFFIX
7c. MAILING ADDRESS 7d. SEEINSTRUCTIONS	ADD'L INFO RE 7e. TYPE OF OR	CITY 71. JURISDICTION	OF ORGANIZATION		OSTAL CODE	COUNTR
	ORGANIZATION DEBTOR	a hov				
8. AMENDMENT (COLL Describe collateral d	ATERAL CHANGE): check only <u>on</u> leleted or added, or give entire	restated collateral description, or description	cribe collatera) 🔲 assig	ned.		
8. AMENDMENT (COLL Describe collateral d	ATERAL CHANGE): check only <u>on</u>	restated collateral description, or des	cribe collateral 🔲 assig	ned.		
9. NAME OF SECURED adds collateral or adds the	DPARTY OF RECORD AUTHOR e authorizing Debtor, or if this is a Term	restated collateral description, or description or description or description or description.	assignor, if this is an Ass	gnment). If this is an	Amendment authorized ing this Amendment	by a Debtor wh

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UCC FINANCING STATEM FOLLOW INSTRUCTIONS (front and back		ENT ADDENDUM	
11. INITIAL FINANCING STATEMENT FI	LE# (same as item 1a on Ame	endment form)	
Instument #0200400686			
12. NAME OF PARTY AUTHORIZING TO 129. ORGANIZATION'S NAME FIRST WESTROADS BA	NK, INC.		
126. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME,SUFFIX	
13. Use this space for additional informat	on		

Lot 3, Toukan Forth, Subdivision, Hall County, Nebraska. (1604 Diers Ave. Grand Island, NE 68803)