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SUBMITTED_GREAT WESTERN BANK - THE N

FILED SARPY CO. NE. INSTRUMENT NUMBER

2018-19964

2018 Aug 24 08:53:10 AM

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REGISTER OF DEEDS

THIS PAGE ADDED FOR RECORDING INFORMATION.

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LLOYD J. DOWDING

SARPY COUNTY REGISTER OF DEEDS 1210 GOLDEN GATE DRIVE PAPILLION, NE 68046-2842 402-593-5773

UCC FINANCING STATEMENT AMENDM	ENT						
A. NAME & PHONE OF CONTACT AT FILER (optional)	<u> </u>	1					
LINDA DUNCAN (402) 952-6062							
B. E-MAIL CONTACT AT FILER (optional)		1					
linda.duncan@greatwesternbank.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)		4					
l							
GREAT WESTERN BANK 9290 WEST DODGE ROAD, SUITE 401	I						
OMAHA, NE 68114		ļ					
1,	1						
L_		THE ABO	OVE SPAC	CE IS FO	R FILING	OFFICE USE C	NLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2013-33748	:	1b. This FINANCIN (or recorded) in				is to be filed [for r	ecord]
2. TERMINATION: Effectiveness of the Financing Statement identifies	t about is terminated w	Filer: attach Ame	endment Add	endum (Fo	m UCC3Ac	l) and provide Debtor	
Statement	1 apove is terminated w	nth respect to the sect	arity interes	i(s) or se	cured Pari	y authorizing this	emmadon
3. ASSIGNMENT (full or partial): Provide name of Assignee In Item 7			name o	f Assignor	in item 9		
For partial assignment, complete items 7 and 9 and also indicate affe			way at Can-	and Bady		- this Captionalis	- Statement in
4. CONTINUATION: Effectiveness of the Financing Statement Identification continued for the additional period provided by applicable law	ied above with respect	to the security interes	t(s) or Sect	irea Pany	autnonzir	ig this Commutation	n Statement is
5. PARTY INFORMATION CHANGE:			<u>-</u>			····	
Crieck <u>Orie</u> of these two boxes.	ck one of these three bo CHANGE name and/or a	ddress: Complete _	_ADD nam	e: Comple	ete item _	DELETE name: (Sive record name
This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information	item 6a or 6b; <u>and</u> item 7 Change - provide only		/a or /b,	and item 7	c _	to be deleted in it	em 6a of 6b
6a. ORGANIZATION'S NAME							
OR 66, INDIVIDUAL'S SURNAME	FIRST PERSON	IAI NAME		ADDITIO	NAI NAM	E(S)/INITIAL(S)	SUFFIX
						-(-)///	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party	nformation Change - provide of	only one name (7a or 7b) (use	e exact, full na	me; do not a	mit, modify, o	r abbreviate any part of	the Debtor's name)
7a. ORĜANIŽATION'S NAME							
OR 7b. INDIVIDUAL'S SURNAME							
INDIVIDUAL'S FIRST PERSONAL NAME							
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	<u>-</u>		_				SUFFIX
7c. MAILING ADDRESS	CITY			STATE	POSTAL	CODE	COUNTRY
a Collateral chance to the first to the	7.00	Detere					SSIGN collateral
COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	_ ADD coilateral	DELETE collateral		ESIAIE	covered co	liaterai A	SSIGN COLLAREI AL
 NAME OF SECURED PARTY OF RECORD AUTHORIZING THE If this is an Amendment authorized by a DEBTOR, check here and pre- 	IIS AMENDMENT: P ovide name of authorizing		9a or 9b) (n	ame of As	signor, if t	nis is an Assignmer	et)
9a. ORGANIZATION'S NAME		=					
GREAT WESTERN BANK ON ON INDIVIDUAL'S SURNAME	EIDET DEBESS	IAI MAME		I A DOUT!	MAL MARA	Z/CMMTIAL/C	Terren
an implainnar 2 anname	FIRST PERSON	AL NAME		ADDITIO	INAL NAM	E(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:				.			<u></u>
FANTASY'S, INC.							

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 2013-33748 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME **GREAT WESTERN BANK** 12b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) **SUFFIX** 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 FANTASY'S, INC. OR 13b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) FIRST PERSONAL NAME SUFFIX 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): 15. This FINANCING STATEMENT AMENDMENT: 17. Description of real estate: covers timber to be cut covers as-extracted coltateral is filed as a fixture filling LOT 2, SOUTHPORT EAST REPLAT THREE, AN 16. Name and address of a RECORD OWNER of real estate described in item 17 ADDITION TO THE CITY OF LA VISTA, SARPY (if Debtor does not have a record interest): COUNTY, NEBRASKA

18. MISCELLANEOUS: