THE ABOVE SPACE IS RESERVED FOR THE REGISTER OF DEEDS RECORDING INFORMATION

DEATH CERTIFICATE COVER SHEET	
LEGAL DESCRIPTION	_
LOT(S):	
BLOCK:	_
ADDITION:	•
☑ UCC COVER SHEET 3 PS	
UCC (NEW, CONTINUATION, ASSIGNMENT, AMENDMENT, CORRECTION)	
☐ RELEASE OF UCC	
TERMINATION OF UCC	
ATTACHMENTS - OTY.	

UCC FINANCING STATEMENT AMENIFOLLOWINSTRUCTIONS	DMENT				
A. NAME & PHONE OF CONTACT AT FILER (optional) LINDA DUNCAN (402) 952-6062		7			
B. E-MAIL CONTACT AT FILER (optional) linda.duncan@greatwesternbank.com		1			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
GREAT WESTERN BANK 9290 WEST DODGE ROAD, SUITE 401 OMAHA, NE 68114	1				
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1a. INITIAL FINANCING STATEMENT FILE NUMBER		1b. This FINANCING STAT (or recorded) in the RE	EMENT AME	R FILING OFFICE USE NDMENT is to be filed [fo RECORDS	
2013110243 2. TERMINATION: Effectiveness of the Financing Statement ide	entified above is terminated	Filer: attach Amendment /	Addendum (For	m UCC3Ad) <u>and</u> provide Deb	
Statement 3. ASSIGNMENT (full or partial): Provide name of Assignee in	item 7a or 7h, and address	of Assigned in item 7c and gam	e of Assignor	in item 9	
For partial assignment, complete items 7 and 9 and also indica	te affected collateral in item	8			
4. CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law	identified above with respe	ct to the security interest(s) of S	ecured Party	authorizing this Continual	ion Statement is
5. PARTY INFORMATION CHANGE: Check one of these two boxes: AN	D Check one of these three	boxes to:			
Check one of these two boxes: This Change affects Debtor or Secured Party of record	CHANGE name and/or item 6a or 6b; and item	address: Complete 7a or 7b and item 7c 7a or 7	name: Comple 7b, <u>and</u> item 7	te item DELETE name c Deteted in	Give record name item 6a or 6b
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1. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 2013110243 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME GREAT WESTERN BANK				
). INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME		-		
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ARON	F SPACE IS FOR FILING OFFICE I	ISE ONLY
		dexing purposes only i	n some filing offices - see Instruction item	
a. ORGANIZATION'S NAME ANTASY'S, INC.				
b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	E	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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