

UCC FINANCING STATEMENT AMENDMENT
FOLLOW INSTRUCTIONS

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RECORDED & ENTERED
BOOK 638 PAGE 59
Mortgages
2016 MAR -8 PM 3:04

Lisette Kegels
REGISTER OF DEEDS
PLATTE COUNTY, NE

Fee \$10.50
Mail-CT Lien Solutions

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141	
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 16911 - US BANK-	
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	52853785 NENE FIXTURE

File with: Platte, NE

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER * BOOK 17 OF C/C PAGE 141 BK 17 PG 141 8/17/2001 CC NE		1b. <input checked="" type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13	
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement			
3. <input type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8			
4. <input checked="" type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law			
5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check one of these two boxes: <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record AND Check one of these three boxes to: <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b			
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)			
6a. ORGANIZATION'S NAME COLUMBUS APARTMENT PARTNERS, LLC			
OR		6b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME		ADDITIONAL NAME(S) INITIAL(S)	
SUFFIX			
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)			
7a. ORGANIZATION'S NAME			
OR			
7b. INDIVIDUAL'S SURNAME			
INDIVIDUAL'S FIRST PERSONAL NAME			
INDIVIDUAL'S ADDITIONAL NAME(S) INITIAL(S)			
SUFFIX			
7c. MAILING ADDRESS		CITY	
STATE		POSTAL CODE	
COUNTRY			
8. <input type="checkbox"/> COLLATERAL CHANGE: Also check one of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral:			

The complete information for 1a. INITIAL FINANCING STATEMENT FILE NUMBER

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9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor			
9a. ORGANIZATION'S NAME US BANK NATIONAL ASSOCIATION			
OR		9b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME		ADDITIONAL NAME(S) INITIAL(S)	
SUFFIX			
10. OPTIONAL FILER REFERENCE DATA: Debtor Name: COLUMBUS APARTMENT PARTNERS, LLC 52853785 3000023930			

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

COLUMBUS APARTMENT

Prepared by CT Lien Solutions, P.O. Box 29071,
Glendale, CA 91209-9071 Tel (800) 331-3282

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form
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12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

12a. ORGANIZATION'S NAME

US BANK NATIONAL ASSOCIATION

OR

12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S) INITIAL(S)

SUFFIX

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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

COLUMBUS APARTMENT PARTNERS, LLC

OR

13b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S) INITIAL(S)

SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

Debtor Name and Address:

COLUMBUS APARTMENT PARTNERS, LLC - 14441 DUPONT CT. , OMAHA, NE 68144

Secured Party Name and Address:

US BANK NATIONAL ASSOCIATION - 400 CITY CENTER , OSHKOSH, WI 54901

15. This FINANCING STATEMENT AMENDMENT:

☐ covers timber to be cut ☐ covers as-extracted collateral ☒ is filed as a fixture filing16. Name and address of a RECORD OWNER of real estate described in item 17
(if Debtor does not have a record interest):

17. Description of real estate:

The Real Estate is known as: 19TH ST. AND
48TH AVE., COLUMBUS, NE 68601
Lot 1, Meadowlark Village Subdivision, City of
Columbus, Platte County, Nebraska
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17

18. MISCELLANEOUS: 62853785-NE-141 16911 - US BANK- LENDING SER US BANK NATIONAL ASSOCIATION Fte with: Platte, NE 3000023930 COLUMBUS APARTMENT PARTNERS, LLC

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FILING OFFICE COPY - UCC FINANCING STATEMENT AMENDMENT ADDENDUM (Form UCC3Ad) (Rev. 04/20/11)

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