



### UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

**A NAME & PHONE OF CONTACT AT FILER (optional)**  
**Joannie Kohel 402.437.3602**

**B SEND ACKNOWLEDGMENT TO (Name and Address)**

Joannie Kohel  
 Assurity Life Insurance Company  
 PO Box 82533  
 Lincoln, NE 68501

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a INITIAL FINANCING STATEMENT FILE # **2007-028929 initial date 6-11-07**

1b This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the  REAL ESTATE RECORDS

2  **TERMINATION** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement

3  **CONTINUATION** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

4  **ASSIGNMENT (full or partial)** Give name of assignee in item 7a or 7b and address of assignee in item 7c, and also give name of assignor in item 9

5 **AMENDMENT (PARTY INFORMATION)** This Amendment affects  Debtor  Secured Party of record. Check only one of these two boxes

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7

CHANGE name and/or address. Please refer to the detailed instructions in regards to changing the name/address of a party

DELETE name. Give record name to be deleted in item 6a or 6b

ADD name. Complete item 7a or 7b and also item 7c, also complete items 7e-7g (if applicable)

6 **CURRENT RECORD INFORMATION**

6a ORGANIZATION'S NAME

OR

6b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7 **CHANGED (NEW) OR ADDED INFORMATION**

7a ORGANIZATION'S NAME

OR

7b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7c MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

7d **SEE INSTRUCTIONS** ADD'L INFO RE ORGANIZATION DEBTOR 7e TYPE OF ORGANIZATION 7f JURISDICTION OF ORGANIZATION 7g ORGANIZATIONAL ID # if any  NONE

8 **AMENDMENT (COLLATERAL CHANGE)** check only one box

Describe collateral  deleted or  added or give entire  restated collateral description or describe collateral  assigned

9 **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT** (name of assignor, if this is an Assignment) If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here  and enter name of DEBTOR authorizing this Amendment

9a ORGANIZATION'S NAME **Assurity Life Insurance Company**

OR

9b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10 **OPTIONAL FILER REFERENCE DATA**  
 Debtor: The Jerome Jung Sr. and Katharina Jung Living Trust dated February 15, 2007 4116 Lancaster County, NE

**UCC FINANCING STATEMENT AMENDMENT ADDENDUM**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

11 INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)  
**2007-028929 initial date 6-11-07**

12 NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)  
12a ORGANIZATION'S NAME  
**Assurity Life Insurance Company**  
OR  
12b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

13. Use this space for additional information  
  
**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

**Debtor:**  
— **The Jerome Jung Sr. and Katharina Jung Living Trust dated February 15, 2007**  
**5815 S. 157th Street**  
**Omaha, NE 68135**

**Secured Party:**  
**Assurity Life Insurance Company**  
**PO Box 82533**  
**Lincoln, NE 68501**

**Description of Real Estate:**  
**Units 102 and 301, Taylor Meadows Office Park, a Condominium, Lincoln, Lancaster County,**  
**Nebraska; according to the Declaration recorded May 20, 1994 as Inst. No. 94-24113; records of Lancaster County,**  
**Nebraska.**

*No  
TAMPOFFA CO*