

Recorded \_\_\_\_\_  
General \_\_\_\_\_  
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Photostat \_\_\_\_\_  
Proofed \_\_\_\_\_  
Scanned \_\_\_\_\_

*Carolyn M. Stodola*  
REGISTER OF DEEDS

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

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) 14060 - FARM CREDIT	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	69853656  <b>NENE FIXTURE</b>
File with: Washington, NE	

**FILED**  
2019 May-09 AM 08:46

Carolyn Stodola  
WASHINGTON COUNTY  
REGISTER OF DEEDS  
BLAIR, NE

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME				
OR	1b. INDIVIDUAL'S SURNAME			
	Rhea	FIRST PERSONAL NAME William	ADDITIONAL NAME(S)/INITIAL(S) H	SUFFIX
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
1413 Woodlawn Dr		Fremont	NE	68025
				COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	Rhea Cattle Company			
	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
5935 McCall Ln		Arlington	NE	68002
				COUNTRY USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME				
OR	FARM CREDIT SERVICES OF AMERICA, PCA			
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
PO BOX 2409		Omaha	NE	68103
				COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:  
Valley 8T Center Pivot 19656008U  
Valley 4T Center Pivot 1965648U

5. Check only if applicable and check only one box: Collateral is  held in a Trust (see UCC1Ad, item 17 and Instructions)  being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:  
 Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:  
 Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:  
69853656 267

3189143118704

# UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME	
OR	
9b. INDIVIDUAL'S SURNAME	
Rhea	
FIRST PERSONAL NAME	
William	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
H	

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME				
OR				
10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

11.  ADDITIONAL SECURED PARTY'S NAME or  ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME				
Mid-Continent Irrigation Inc				
OR				
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2930 W 23rd Rd	Fremont	NE	68025	USA

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13.  This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)      14. This FINANCING STATEMENT:  covers timber to be cut     covers as-extracted collateral     is filed as a fixture filing

<p>15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):</p> <p><b>Rhea Cattle Co</b></p>	<p>16. Description of real estate:</p> <p>Valley 8T Center Pivot 19656008U S1/2SE1/4 3-17-10 Washington County, NE Real Estate Owner: Rhea Cattle Co Parcel # 890000735</p> <p>Valley 4T Center Pivot 1965648U [ See Exhibit for Real Estate ]</p>
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17. MISCELLANEOUS: 69853856-NE-177 14060 - FARM CREDIT SERVICES FARM CREDIT SERVICES OF File with: Washington, NE 287 3189143118704



**Debtor:** Rhea, William, H

Exhibit for Real Estate

**16. Description of real estate:** Continued

S1/2SE1/4 3-17-10  
Washington County, NE  
Real Estate Owner: Rhea Cattle Co  
Parcel # 890001113

