



Fee amount: 10.50 FB: 59-25702 COMP: AH



872377

	DEATH CERTIFICATE COVER SHEET
	LEGAL DESCRIPTION
	LOT(S):
	BLOCK:
	ADDITION:
A	UCC COVER SHEET
	UCC (New, Continuation, Assignment, Amendment, Correction)
	RELEASE OF UCC
	☐ TERMINATION OF UCC
	N ATTACHMENTS - OTY

11. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION LLC NE 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAME ADD'L INFO RE ORGANIZATION STATE POOR ORGANIZATION STATE POOR ORGANIZATION DEBTOR 2c. MAILING ADDRESS CITY STATE POOR ORGANIZATION DEBTOR 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b) 3a. ORGANIZATION'S NAME American National Bank OR 3b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAM American National Bank OR 3c. MAILING ADDRESS CITY STATE POOR ORGANIZATION ORGANIZA		
American National Bank 1413 South Washington Papillion, NE 68046 DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1s or 1b) - do not abbreviate or combine names 1s. ORGANIZATION'S NAME 2 CO. Properties, L.L.C. TID. INDIVIDUAL'S LAST NAME INC. STATE PORTON NAME 10 MALING ADDRESS 116.26 Nicholas Street Omah NE 6 16 SEE INSTRUCTIONS ADDL INFO RE 1s. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATION DESTOR LLC NE 22. ADDITIONAL DESTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) - do not abbreviate or combine names 22. ORGANIZATION'S NAME 23. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME MIDD		
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UCC FINANCING STATEMENTADDENDUM					
FOLLOW INSTRUCTIONS (front and back) CAREFULLY 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STA					
9a. ORGANIZATION'S NAME					
Z Co. Properties, L.L.C.					
OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX				
S. INDIVISORES ENOT IVINE	Wilder Francis				
10. MISCELLANEOUS:					
		THE ABOVE	SPACE	IS FOR FILING OFF	ICE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one	name (11a or 11b) - do not abbre	viate or combine name	s		
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OR 11b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
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11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
11d. SEE INSTRUCTIONS ADD'L INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION	11f. JURISDICTION OF ORG	ANIZATION	11g. OR	GANIZATIONAL ID#, if:	any —
DEBTOR	ĺ				NONE
12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P	S NAME - insert only one name	e (12a or 12b)			
12a. ORGANIZATION'S NAME					
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers timber to be cut or as-extracted	16. Additional collateral descr	iption:			
collateral, or is filed as a fixture filing.					
14. Description of real estate:					
Lot 2, Miracle Hills Park Replat 5, an Administrative Plat to					
the City of Omaha, as surveyed, platted and recorded,					
Douglas County, Nebraska					
15. Name and address of a RECORD OWNER of above-described real estate (if					
Debtor does not have a record interest):					
	17. Check only if applicable and check only one box.				
	Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate				
	18. Check only if applicable ar	nd check only one box.			•
	Debtor is a TRANSMITTIN	G UTILITY			
	Filed in connection with a l	Manufactured-Home Tr	ansaction		
	Filed in connection with a l				