UNIFORM COMMERCIAL CODE — FINANCING STATEMENT CHANGE — FORM N-UCC-2

This STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code

IMPORTANT:
Read instructions on back before filling out form. Receipt No.

1. File No. of Orig. Financing Statement	1A. Date of Filing of Orig. Financing Statement	1B. Date of Orig. Financing Statement	1C. Place of Filing Orig. Financing Statement
1235	AUG 3, 1988		EUREKA COUNTY NEVADA

2. DEBTOR (As Appears on Original Financing Statement) (ONE NAME ONLY) — 2A. SOCIAL SECURITY OR FEDERAL TAX NO.
☐ LEGAL BUSINESS NAME
☐ INDIVIDUAL (LAST NAME FIRST) Robert N. Rebholtz dba Rebholtz Land & Cattle

2B. MAILING ADDRESS (As Appears on Original Financing Statement)	2C. CITY, STATE	2D. ZIP CODE
1555 Shoreline Drive, Suite 320	Boise, Idaho	83707

3. ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY) — 3A. SOCIAL SECURITY OR FEDERAL TAX NO.
☐ LEGAL BUSINESS NAME
☐ INDIVIDUAL (LAST NAME FIRST)

3B. MAILING ADDRESS	3C. CITY, STATE	3D. ZIP CODE

4. ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY) — 4A. SOCIAL SECURITY OR FEDERAL TAX NO.
☐ LEGAL BUSINESS NAME
☐ INDIVIDUAL (LAST NAME FIRST)

4B. MAILING ADDRESS	4C. CITY, STATE	4D. ZIP CODE

5. SECURED PARTY — 5A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.
NAME United States National Bank of Oregon
MAILING ADDRESS 555 SW Oak PL7
CITY Portland STATE OR ZIP CODE 97204 93-0571729

6. ASSIGNEE OF SECURED PARTY (If Any) — 6A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.
NAME
MAILING ADDRESS
CITY STATE ZIP CODE

7.
A. [X] CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, fixtures, or oil, gas or minerals check here ☐ and insert description of real property on which growing or to be grown or to which affixed or to be affixed or from which to be extracted in Item 8 below. If crops or fixtures, also insert name of record owner of real estate (Effective only if authorized within 6 months prior to expiration date.

B. ☐ RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 8 below. Release does not terminate debt.

C. ☐ ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all or part of the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 8 below.

D. ☐ TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above.

E. ☐ AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 8 below (Signature of Debtor(s) and Secured Party(ies) required on all amendments.)

8.

THIS SPACE FOR USE OF FILING OFFICER

9. (Date) June 24 19 93

By _____ (TITLE)
SIGNATURE(S) OF DEBTOR(S)

By Nona Olson 6/24/93 (TITLE)
SIGNATURE(S) OF SECURED PARTY(IES)
TYPE NAME(S)

United States National Bank of Oregon
TYPE NAME(S)

10. This Space for Use of Filing Officer (Date, Time, File Number and Filing Officer)

FILED THIS 28TH DAY OF JUNE 1993 AT 30 MINS. PAST 1 P.M., RECORDS OF EUREKA COUNTY, NEVADA

M.M. Rebholtz
EUREKA COUNTY RECORDER

145766

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11. Return Copy to:

NAME United States National Bank of Oregon
ADDRESS 555 SW Oak PL7
CITY, STATE AND ZIP Portland, OR 97204

Trust Account Number (If Applicable)

YELLOW—Alphabetical, PINK—Acknowledgement, GREEN—Secured Party, BLUE—Debtor

UNIFORM COMMERCIAL CODE FORM N-UCC-2 (Rev. 12-91) Approved by the Nevada Secretary of State (Filing Fees, See Instructions)