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
UCC File No. 1173 Inst. No. 103351	July 23, 1986	July 10, 1986	Eureka County, Nevada

2. DEBTOR (As Appears on Original Financing Statement; ONE NAME ONLY)
☐ LEGAL BUSINESS NAME
☒ INDIVIDUAL (LAST NAME FIRST): RUSSELL, Daniel H.
2A. SOCIAL SECURITY OR FEDERAL TAX NO: [redacted]
2B. MAILING ADDRESS (As Appears on Original Financing Statement): P. O. Box 339
2C. CITY, STATE: Folsom, California
2D. ZIP CODE: 95630

3. ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY)
☐ LEGAL BUSINESS NAME
☒ INDIVIDUAL (LAST NAME FIRST): RUSSELL, Roberta A.
3A. SOCIAL SECURITY OR FEDERAL TAX NO: [redacted]
3B. MAILING ADDRESS: P. O. Box 339
3C. CITY, STATE: Folsom, California
3D. ZIP CODE: 95630

4. ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY)
☐ LEGAL BUSINESS NAME
☐ INDIVIDUAL (LAST NAME FIRST)
4A. SOCIAL SECURITY OR FEDERAL TAX NO:
4B. MAILING ADDRESS:
4C. CITY, STATE:
4D. ZIP CODE:

5. SECURED PARTY
NAME: LLOYDS BANK CALIFORNIA
MAILING ADDRESS: 601 "J" Street
CITY: Sacramento STATE: California ZIP CODE: 95814
5A. SOCIAL SECURITY NO. FEDERAL TAX NO OR BANK TRANSIT AND A.B.A. NO: 11-40/1210

6. ASSIGNEE OF SECURED PARTY (If Any)
NAME: MONFORT FINANCE COMPANY, INC.
MAILING ADDRESS: P. O. Box G
CITY: Greeley STATE: Colorado ZIP CODE: 80632
6A. SOCIAL SECURITY NO. FEDERAL TAX NO OR BANK TRANSIT AND A.B.A. NO.: 84-0913363

7.

A. ☐ 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 on Item 8 below. If crops or fixtures, also insert name of record owner of real estate. Effective only if submitted 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.

9. (Date) November 12, 19 93

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

SANWA BANK CALIFORNIA, formerly known as LLOYDS BANK CALIFORNIA

By: _____ (SIGNATURE(S) OF SECURED PARTY(IES)) V.P. (TITLE)

SANWA BANK CALIFORNIA, formerly known as LLOYDS BANK CALIFORNIA
(TYPE NAME(S))

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

FILED THIS 2 ND DAY OF DEC 1993 AT 40 MINS. PAST 11 A.M., RECORDS OF EUREKA COUNTY, NV.
M.N. Rebaleati
EUREKA COUNTY RECORDER

147846

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11. *Return Copy to:*
NAME: MORGAN, LEWIS & BOCKIUS
ADDRESS: 801 South Grand Avenue, 22nd Floor
CITY, STATE AND ZIP: Los Angeles, California 90017
Attention: John M. DeMarco, Esq.

Trust Account Number (If Applicable)

THIS SPACE FOR USE OF FILING OFFICER

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)