APN: 007-210-37		RECORDED	HB 8 PAGE PAGE PAGE PAGE PAGE PAGE PAGE PAGE	STOF
UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]		EUREK A	R 21 "PH 1: (COUNTY, NEVA	7.6
Diligenz, Inc. 1-800-858-5294 B. SEND ACKNOWLEDGMENT TO: (Name and Address)		M.N. REB FILE N 19656	IALEATI.RECORD (O. FEE\$	420
Diligenz, Inc. 6500 Harbour Heights Pkwy, Suite 400 Mukilteo, WA 98275		13000		
Filed In: Nevac		HE ABOVE SPACE IS FO	R FILING OFFICE USE	
173914 BK 332 PG 596 3/2/2000 2. X TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with respect to security	X to b	e filed (for record) (or reco AL ESTATE RECORDS.	rded) in the
CONTINUATION: Effectiveness of the Financing Statement identified about continued for the additional period provided by applicable law.				
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Deadle of the following three boxes and provide appropriate information in CHANGE name and/or address: Please refer to the detailed instructions	ebtor or Secured Party of reco	rd. Check only <u>one</u> of these t	wo baxes.	n and also item 7c
in regards to changing the name/address of a party. 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	DELETE name: Give record to be deleted in item 6a or 6b	alsoco	ame: Complete item 7a or 7t omplete items 7e-7g (if applic	able).
OR 6b. INDIVIDUAL'S LAST NAME NICHOLSON	FIRST NAME EDWARD	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. SEEINSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	71. JURISDICTION OF ORGANIZ	ZATION /g. ORG.	ANIZATIONAL ID#, if any	NONE
AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collate added, or give entire restated collate.	eral description, or describe collater	al assigned.		
 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM adds collateral or adds the authorizing Debtor, or if this is a Termination authorized 9a. ORGANIZATION'S NAME 		is is an Assignment). If this is ster name of DEBTOR author		by a Debtor which
FIRST NATIONAL BANK OF OMAHA OR 95. INDIVIDUAL'S LAST NAME	FIRST NAME	WIDDLE !	NAME	SUFFIX
10.0PTIONAL FILER REFERENCE DATA 98000087491-70 NEVADA FEED AND CATTLE (CO 09/07/04		<u> </u>	12302616
FILING OFFICE COPY — UCC FINANCING STATEMENT AMEND		05/22/02) BOOK	408 PAGEO	

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)

173914 BK 332 PG 596 3/2/2000 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)
12a. ORGANIZATION'S NAME FIRST NATIONAL BANK OF OMAHA OR 125. INDIVIDUAL'S LAST NAME MIDDLE NAME, SUFFIX 13. Use this space for additional information THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY SE 1/4 AND SW 1/4 LOT 1 AND N 1/2 N 1/2 LOTS 2, 3 AND 4 36-21N-53E, M.D.B. & M., EUREKA COUNTY, NEVADA RECORD OWNER: NEVADA FEED & CATTLE CO

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