				# 0215	PM .
		Re	cording LIEN 50	requested By	cord
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAR	AMENDMENT EFULLY		ke Reb	aleati - Recor	-der of 2
A. NAME & PHONE OF CONTACT AT FILER (optional) Phone (800) 331-3	3282 Fax (818) 662-4141	RP	TT: pok – 504	Recorded	By: FES
B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Addre	ess) 17951 FIRST NATIONAL				
CT Lien Solutions	25390550	02	15498	<u> </u>	
P.O. Box 29071 Glendale, CA 91209-9071	NVNV FIXTURE				
		THE ABOV	The state of the s	FOR FILING OFFICE USE	
1a. INITIAL FINANCING STATEMENT FILE # 203217 BK 431 PGS 001-002 01/19/06	6 CC NV Eureka		v to be	FINANCING STATEMENT A filed [for record] (or recorde L ESTATE RECORDS.	
TERMINATION: Effectiveness of the Financing S X CONTINUATION: Effectiveness of the Financing S continued for the additional period provided by applicable.	tatement identified above is terminated wit tatement identified above with respect to t le law.	h respect to security interest(s) of ne security interest(s) of the Securi	the Secured ed Party auth	Party authorizing this Termin porizing this Continuation Sta	ation Statement.
4. ASSIGNMENT (full or partial): Give name of ass					
5. AMENDMENT (PARTY INFORMATION): This Amendment Also check one of the following three boxes and proceed that the change and/or address: Give current record name (if name change) in item 7a or 7b and/or new address.	ovide appropriate information in item the in item 6a or 6b, also give new	sured Party of record. Check only one of and/or 7. DELETE name: Give record nate to be deleted in item 6a or 6b.	me 🦳 A	nwo boxes. DD name: Complete item 7a em 7c; also complete items	
6a. ORGANIZATION'S NAME A.G. COMMODITIES, INC		$\overline{}$	·		
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	AME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:		/ / /	_		
7a. ORGANIZATION'S NAME			>		. <u></u>
OR 75. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	AME	SUFFIX
7c. MAILING ADDRESS	CITY	1	STATE	POSTAL CODE	COUNTRY
7d. SEE INSTRUCTION ADD'L INFO RE 7e TYPE (ORGANIZATION DEBTOR	DF ORGANIZATION 7f. JURISDICTI	ON OF ORGANIZATION	7g ORGAI	NIZATIONAL ID #, if any	NONE
8. AMENDMENT (COLLATERAL CHANGE): check or Describe collateral deleted or added, or give en PURCHASE MONEY SECURITY INTERE	stire restated collateral description,	ESCRIBED PROPERT	Y TOGE	THER WITH PROC	CEEDS
THEREOF. PURCHASE MONEY SECUP PROCEEDS THEREOF. 1-7-TOWER LI	RITY INTEREST IN THE FO NDSAY ZIMMATIC CENTER	R PIVOT IRRIGATION	SYSTEM	, S/N L90369.	VV 1111

10. OPTIONAL FILER REFERENCE DATA

FIRST NATIONAL EQUIPMENT FINANCING, INC

9a. ORGANIZATION'S NAME

9b. INDIVIDUAL'S LAST NAME

OR

25390550 Debtor Name: A.G. COMMODITIES, INC. A.G. FARM COMMODITIES, INC. 809-0015264-000

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.

FIRST NAME

SUFFIX

MIDDLE NAME

UC FO	CC FINANCING STATEM LLOW INSTRUCTIONS (front a	ENT AM nd back) CA	ENDMEN REFULLY	T ADDENDUM
11.	INITIAL FINANCING STATEMENT F	ILE # (same a	as item 1a on Amer	dment form)
203	3217 BK 431 PGS 001-002	01/19/06	CC NV Eurek	а
12. 1	VAME of PARTY AUTHORIZING THIS AN	IENDMENT (san	ne as item 9 on Amer	dment form)
	12a. ORGANIZATION'S NAME FIRST NATIONAL EQUIPMENT F	INANCING, IN	С	.,
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME, SUFFIX
13.	Use this space for additional infor	mation		

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Recorded Owner: A G FARM COMMODITIES, INC Description: THE NW 1/4 OF SECTION 26, TOWNSHIP 21 NORTH, RANGE 53 EAST, EUREKA COUNTY, NEVADA.



0215498 Book 504 Page: 41 09/24/2010