		DO	C#	2202 10:54A	11
UCC FINANCING STATEMENT AMENDMEN	r	Offi	cia	1 Reco	rd
FOLLOW INSTRUCTIONS (front and back) CAREFULLY		Requested COW COUN	BY TV TIT	LE CO	
A. NAME & PHONE OF CONTACT AT FILER [optional]		CON COOK	uroka	County - N	M/
Title Service and Escrow Co. 775-575-2286		Mika Da	halaa	ti Borone	to n
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				ti - Record	
		Page: 1 o Recorded		Fee: \$60. RPTT: \$ 0.	
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555 WEST SILVER ST, SUITE 101					
ELKO, NV. 89801-2627					
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L		THE ABOVE CDAC	E IO COD O	***	
1a. INITIAL FINANCING STATEMENT FILE #				FILING OFFICE USE ON NANCING STATEMENT A	
Book 332, page 165, File No. 173711 recorded December	or 20 1000		to be fi	led [for record] (or records	
				ESTATE RECORDS.	
2. TERMINATION: Effectiveness of the Financing Statement identified above is			76	<u> </u>	76. 76.
CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.	B with respect to security inter	rest(s) of the Secured P	arty authorizi	ing this Continuation State	ement is
			1		7/
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and ac	dress of assignee in item 7c; a	and also give name of as	ssignor in iten	n 9.	1
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debr	tor or Secured Party of r	ecord. Check only one	of these two	baxes,	
Also check one of the following three boxes and provide appropriate information in ite	ems 6 and/or 7.	/			
CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.	DELETE name: Give reco	ord name	ADD nam	e: Complete item 7a or 7b, a olete items 7e-7g (if applicab	nd also item 7c;
6. CURRENT RECORD INFORMATION:	to be deleted in itself be c	U.S.	/ ausocom	were neitte sest & tuabbucain	
6a. ORGANIZATION'S NAME		- -			-
OR 8b, INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NA	ME	SUFFIX
MOYLE	DUSTY	1			
	DUSIT		L.		<u> </u>
7. CHANGED (NEW) OR ADDED INFORMATION: 17a. ORGANIZATION'S NAME			<u> </u>		
Ta. ORGANIZATIONS NAME		1	1		
OR 75, INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NA		SUFFIX
70, INDIVIDUACIS ENST NAME	PIASI NAME	/ '	MIDDLE NA	ME	SOLLIV
		\	***		
7c. MAILING ADDRESS	CITY	\	STATE P	OSTAL CODE	COUNTRY
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e, TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGA	ANIZATION	7g. ORGANI	IZATIONAL ID#, if any	
DESTOR		1			NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.					
Describe collateral deleted or added, or give entire restated collateral	description, or describe colle	ateral assigned.			
		_			
Irrigation fixtures, including but not limited to pivot sp					
crops growing or to be grown on, and any goods descri	bed above which ar	e or are to beco	me fixtu	res, are or are to	be affixed
to subject property.					
\ \ /					
\ \ \					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME	NDMENT (name of assignor,	if this is an Assignment)	I. If this is an	Amendment authorized by	a Debtor which
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by		ர் this is an Assignment id enter name of DEBT(a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized b 9a. ORGANIZATION'S NAME	y a Debtor, check hare an	d enter name of DEBT			r a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized b 9a. ORGANIZATION'S NAME	y a Debtor, check hare an	d enter name of DEBT			r a Debtor which
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adds collateral or adds the authorizing Debtor, or if this is a Termination authorized b ga. ORGANIZATION'S NAME	y a Debtor, check hare an	d enter name of DEBT	OR authorizin	ng this Amendment	
Pa. ORGANIZATION'S NAME OR OR OR OR OR OR OR OR OR O	y a Debtor, check hare an	d enter name of DEBT	OR authorizin	ng this Amendment	

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

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

File No. 173711, Book 332, page 165, recorded December 19, 1999

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)
12a. ORGANIZATION'S NAME

OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

