DOC # 0223883 Official Record Recording requested By DIVERSIFIED FINANCIAL SERVICES UCC FINANCING STATEMENT AMENDMENT Eureka County - NV FOLLOW INSTRUCTIONS (front and back) CAREFULLY Mike Rebaleati - Recorder A, NAME & PHONE OF CONTACT AT FILER [optional] Page 1 Fee: \$60.00 800-552-1955 Recorded By: FES RPTT B. SEND ACKNOWLEDGMENT TO: (Name and Address) Book- 548 Page- 0101 IRRIGATION FINANCE SOLUTIONS, LLC 14010 FNB PKWY, STE. 400 OMAHA, NE 68154 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE# This FINANCING STATEMENT AMENDMENT IS to be filed [for record) (or recorded) in the 211725 EUREKA COUNTY, NV 03/21/2008 2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. 4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignee in item 9. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check png of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c DELETE name: Give record name to be deleted in item 6a or 6b. ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable). 6. CURRENT RECORD INFORMATION: 6a, ORGANIZATION'S NAME OR 66. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX MARSHALL REESE W. 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR 75, INDIVIDUAL'S LAST NAME IRST NAME MIDDLE NAME SUFFIX 7c. MAILING ADDRESS STATE POSTAL CODE COUNTRY 7d. TAX ID #. SSN OR EIN ADD'L INFO RE 7e, TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any ORGANIZATION DERTOR NONE 8. AMENDMENT (COLLATERAL CHANGE); check only one box. Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned. SEE ATTACHED ADDENDUM(S): 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. 9a. ORGANIZATION'S NAME IRRIGATION FINANCE SOLUTIONS, LLC OR 96. INDIVIDUAL'S LAST NAME MIDDLE NAME FIRST NAME SUFFIX 10, OPTIONAL FILER REFERENCE DATA 43374-012 MARSHALL

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

0211725 EUREKA COUNTY, NV 03/21/2008

12, NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)

12a, ORGANIZATION'S NAME

IRRIGATION FINANCE SOLUTIONS, LLC

OR 12b. INDIVIDUAL'S LAST NAME

MIDDLE NAME, SUFFIX

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

DEBTORS: REESE W. MARSHALL; LISA M. MARSHALL

RECORD OWNERS: REESE MARSHALL

LEGAL DESC.: E2 SEC 8, T21N, R53E, EUREKA COUNTY, NV



03/20/201 Page: 102 Page: 2 of 2

03/20/2013