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04/22/2013

01:07 PM

Official Record

Recording requested By
IRRIGATION FINANCE SOLUTIONS

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$60.00

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RPTT:

Recorded By: FES

Book- 549 Page- 0055



0224126

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

| |
|---|
| A. NAME & PHONE OF CONTACT AT FILER [optional] 800-552-1955 MORGAN CUMMINGS |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address) 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 # 0211863 BK 0472 PG 413-414 EUREKA COUNTY, NV 05/19/08 | 1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. <input checked="" type="checkbox"/> |
| 2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. | |
| 3. <input checked="" type="checkbox"/> 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. <input type="checkbox"/> 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 assignor in item 9. | |
| 5. AMENDMENT (PARTY INFORMATION): This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. <input type="checkbox"/> 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. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> 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 MARK MOYLE FARMS, LLC | |
| OR | 6b. INDIVIDUAL'S LAST NAME FIRST NAME 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. TAX ID # - SSN OR EIN | ADD'L INFO RE ORGANIZATION DEBTOR |
| 7e. TYPE OF ORGANIZATION | 7f. JURISDICTION OF ORGANIZATION |
| 7g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE | |
| 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> 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 <input type="checkbox"/> and enter name of DEBTOR authorizing this Amendment. | | | |
| 9a. ORGANIZATION'S NAME IRRIGATION FINANCE SOLUTIONS, LLC | | | |
| OR | 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME SUFFIX |

10. OPTIONAL FILER REFERENCE DATA

080-0145239-006

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

0211863 BK 0472 PG 413-414 EUREKA COUNTY, NV 05/19/08

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

FIRST NAME

MIDDLE NAME, SUFFIX

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

DEBTORS: MARK MOYLE FARMS, LLC

RECORD OWNERS: MARK MOYLE FARMS, LLC

LEGAL DESC.: SE 1/4 SW 1/4; SW 1/4 SE 1/4 SEC. 7 T-22N R-54 EAST, M.D.B. & M. EUREKA COUNTY, NV

E 1/2 NW 1/4; W 1/2 NE 1/4; NE 1/4 SW 1/4; NW 1/4 SE 1/4 SEC. 18 T-22N R-54 EAST, M.D.B. & M. EUREKA COUNTY, NV



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