

DOC # 0227617

07/21/2014 09:59 AM

Official Record  
Recording requested By

Eureka County - NV  
Mike Rebaleati - Recorder

Fee: Page 1 of 2  
RPTT: Recorded By:  
Book- 567 Page- 0292



UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)  
1-800-648-8026 MORGAN CUMMINGS

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

DIVERSIFIED FINANCIAL SERVICES, LLC  
14010 FNB PKWY, STE. 400  
OMAHA, NE 68154

1a. INITIAL FINANCING STATEMENT FILE NUMBER  
0220740 BK 533 PG 318 EUREKA CO, NV 7/5/12

1b.  This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS  
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2.  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3.  ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4.  CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5.  PARTY INFORMATION CHANGE:  
Check one of these two boxes: AND Check one of these three boxes to:  
This Change affects  Debtor or  Secured Party of record  CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c  ADD name: Complete item 7a or 7b, and item 7c  DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME  
IRRIGATION FINANCE SOLUTIONS, LLC

OR

6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME  
DIVERSIFIED FINANCIAL SERVICES, LLC

OR

7b. INDIVIDUAL'S SURNAME  
INDIVIDUAL'S FIRST PERSONAL NAME  
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
14010 FNB PARKWAY, SUITE 400 OMAHA NE 68154

8.  COLLATERAL CHANGE: Also check one of these four boxes:  ADD collateral  DELETE collateral  RESTATE covered collateral  ASSIGN collateral  
Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a DEBTOR, check here  and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME  
IRRIGATION FINANCE SOLUTIONS, LLC

OR

9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

10. OPTIONAL FILER REFERENCE DATA:  
080-0081068-002

# UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form  
**0220740 BK 533 PG 318 EUREKA CO, NV 7/5/12**

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

|  |        |
|--|--------|
| 12a. ORGANIZATION'S NAME<br><b>IRRIGATION FINANCE SOLUTIONS, LLC</b> |        |
| OR   |        |
| 12b. INDIVIDUAL'S SURNAME  |        |
| FIRST PERSONAL NAME  |        |
| ADDITIONAL NAME(S)/INITIAL(S)  | SUFFIX |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

|  |                                       |                               |        |
|--|---------------------------------------|-------------------------------|--------|
| 13a. ORGANIZATION'S NAME                   |                                       |                               |        |
| OR   |                                       |                               |        |
| 13b. INDIVIDUAL'S SURNAME<br><b>HAPLIN</b> | FIRST PERSONAL NAME<br><b>TIMOTHY</b> | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

15. This FINANCING STATEMENT AMENDMENT:  
 covers timber to be cut  covers as-extracted collateral  is filed as a fixture filing

16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):  
**TIM J. & SANDIE L. HALPIN**

17. Description of real estate:  
**NE 1/4; N 1/2 OF SE 1/4 LOTS 9 & 10 SEC 18 T-20 N R-53E, EUREKA COUNTY, NV**

18. MISCELLANEOUS:



0227617

Book: 567 07/21/2014  
Page: 293 Page: 2 of 2