2020-240706 Rec:\$60.00 06/02/2020 11:25 AM \$60.00 Pgs=2 BANK FIVE NINE - COMMERCIAL LISA HOEHNE, CLERK RECORDER UCC FINANCING STATEMENT AMENDMENT NAME & PHONE OF CONTACT AT FILER (optional) Laura Peters . E-MAIL CONTACT AT FILER (optional) laura.peters@bankfivenine.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) Bank Five Nine ATTN: Commercial Loan Servicing 155 W Wisconsin Ave Oconomowoc, WI 53066 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY D. M. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REALESTATE RECORDS Filer, adopts Amendment Addondum (Form UCCS40) and provide Dobto's name in item 13 229685 2. TERMINATION: Effective 3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in Item 7c and name of Assigner 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: AND Check one of these three Check one of these two boxes: HANGE name and/or address: Complete

✓ item 6a or 6b; and item 7a or 7b and item 7c

✓ Ta or 7a, and item 7c Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only on, name (6a or 6b)

6a. ORGAN ZATION'S NAME This Change affects Debtor First Bank Financial Centre FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a of 7b) (use exact full name, do not onli), mostly, or attrevate any part of the Debtor's name) Bank Five Nine INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) STATE POSTAL CODE COUNTRY 7c MAILING ADDRESS 53066 Oconomowoc USA 155 W Wisconsin Ave ₩ RESTATE covered collatera DELETE collateral 8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collaters. 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9e or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DESTOR, chieck here and provide name of authorizing Dobtor

[9e. ORGANIZATIONS NAME] Bank Five Nine FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 96. INDIVIDUAL'S SURNAME

EUREKA COUNTY, NV

10. OPTIONAL FILER REFERENCE DATA: RAINES LLC - Bank Name Change

2. NAME OF PARTY AUTHORIZING THIS AMENDMENT. Same as term 9 on Amendment form 172. DISGANIZATIONS TABLE BORK FIVE NINE 173. NAME OF PARTY AUTHORIZING THIS AMENDMENT. Same as term 9 on Amendment form 173. DISGANIZATIONS TABLE ADDITIONAL NAME FIRST PERSONAL NAME ADDITIONAL SAME (S)INSTIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 3. Name of DEBTOR on related financing statement (Name of a current Option of record registed for indexing purposes only in some steps officer. say instruction 130. Provide seas before name (13 or 130) (see sead. full mane; do not omit, modify, or abbreviate any part of line Debtor is name); see the neutrons if name costs and is 133. ORGANIZATIONS NAME RAINES LLC 130. INDIVIDUAL'S SURNAME ADDITIONAL SPACE FOR ITEM 8 (Collateral): 147. Toursepine of real estable. 158. ORGANIZATION AMENDMENT 159. INDIVIDUAL'S SURNAME ADDITIONAL SPACE FOR ITEM 8 (Collateral): 157. Toursepine of real estable. 158. ORGANIZATION AMENDMENT 159. INDIVIDUAL'S SURNAME 4 ADDITIONAL SPACE FOR ITEM 8 (Collateral): 157. Toursepine of real estable. 158. Construction of the East Half (E-1/2) of Section 11, Township 19 North, ST East MUB. 8. A. M. more particularly described as follows: 159. Same as address of a RECORD OWNER of real estable described in line 17 150. That portion of the East Half (E-1/2) of Section 11, Township 19 North, ST East MUB. 8. A. M. more particularly described as follows: 150. Same as address of a RECORD OWNER of real estable described in line 17 150. That portion of the East Half (E-1/2) of Section 11, Township 19 North, ST East MUB. 8. A. M. more particularly described as follows: 150. Same as address of a RECORD OWNER of real estable described and solidows: 150. Same as address of a RECORD OWNER of real estable described as follows: 150. Same as address of a RECORD OWNER of real estable described and solidows: 150. Same as address of a RECORD OWNER of real estable described and solidows: 150. Same as address of a RECORD OWNER of real estable described an	1. IN!TIAL FINANCING STATEMENT I	FILE NUMBER: Same as item 1a on Amen	dment form		\ \
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International Association of Commercial Administrators (IACA)
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