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FOLLOW INSTRUCTIONS	AMENDMENT	EUREKA COU	NTY, NV /2025-	254139
A. NAME & PHONE OF CONTACT AT SUBMITTEI Name: Wolters Kluwer Lien Solutions Phone:		41	ogs=3 <b>01/13/2025</b>	
B. E-MAIL CONTACT AT SUBMITTER (optional) uccfilingreturn@wolterskluwer.com		LIEN SOLUTION KATHERINE J	ns . BOWLING, CLERK RECOF	RDER
C. SEND ACKNOWLEDGMENT TO: (Name and Ad	ddress) 36147 - FARM CREDIT		\ \	
Lien Solutions P.O. Box 29071	 102446083			
Glendale, CA 91209-9071	NVNV			
•	FIXTURE			
File with: Eureka, NV SEE BELOW FOR SECURED PARTY		THE ABOVE SPA	CE IS FOR FILING OFFICE US	SE ONLY
a. INITIAL FINANCING STATEMENT FILE NUMBER 2020-240355 4/8/2020 CC NV Eureka		1b This FINANCING STATE (or recorded) in the REAL	MENT AMENDMENT is to be filed [for second or s	or record]
TERMINATION: Effectiveness of the Financing St	tatement identified above is terminated v			
ASSIGNMENT (full or partial): Provide name of Assignment, complete items 7 and 9 are			ssignor in item 9	
CONTINUATION: Effectiveness of the Financing continued for the additional period provided by ap	Statement identified above with respect		Party authorizing this Continuation 9	Statement is
PARTY INFORMATION CHANGE:	phicable law	$\overline{}$		
Check one of these two boxes:	AND Check one of these three I	76. 767	a. Canadata itana DELETE aanaa	0:
This Change affects Debtor or Secured Party o	of record CHANGE name and/of record item 6a or 6b; <u>and</u> item	or address: Complete ADD nam 7a or 7b <u>and</u> item 7c 7a or 7b,	e: Complete item DELETE name: and item 7c to be deleted in	Give record nam item 6a or 6b
CURRENT RECORD INFORMATION: Complete for P     6a. ORGANIZATION'S NAME	arty Information Change - provide only g	one name (6a or 6b)		
OR 6b. INDIVIDUAL'S SURNAME Ropp	FIRST PERSO	DNAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for A	ssignment or Party Information Change - provide or	nly one name (7a or 7b) (use exact full name:	13	ne Debtor's name)
7a. ORGANIZATION'S NAME	,	7		······································
7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME	/	11		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		/ /		SUFFIX
7c. MAILING ADDRESS	СІТҮ		STATE POSTAL CODE	COUNTRY
/				
COLLATERAL CHANGE: Check only one box	C ADD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN* collate
Indicate collateral:	*Check ASSIGN COLLATER/	AL only if the assignee's power to amend the recor	d is limited to certain collateral and describe the co	ollateral in Section 8
. \				
\ \	/ /			
	/ /			
	/ /			
	/			
		<del></del>	ame of Assignor, if this is an Assignm	ent)
D. NAME OF SECURED PARTY OF RECORD A  If this is an Amendment authorized by a DEBTOR, chec  9a. ORGANIZATION'S NAME		<del></del>	ame of Assignor, if this is an Assignm	ent)
9a. ORGANIZATION'S NAME FARM CREDIT SERVICES OF AME	ck here and provide name of author	<del></del>	ame of Assignor, if this is an Assignm	ent)
If this is an Amendment authorized by a DEBTOR, chec 9a. ORGANIZATION'S NAME	ck here and provide name of author	rizing Debtor	ame of Assignor, if this is an Assignm  ADDITIONAL NAME(S)/INITIAL(S)	ent)

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10. OPTIONAL FILER REFERENCE DATA: Debtor Name: Ropp, Delmar Lynn

	C FINANCING STATEMENT AMENDMENT A LOW INSTRUCTIONS	ADDENDUM		^	
	NITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Ameno 10-240355 4/8/2020 CC NV Eureka	1			
	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on An	nendment form	1	\ \	
	12a. ORGANIZATION'S NAME FARM CREDIT SERVICES OF AMERICA, PCA		]	\ \	
			~	\ \	
OR	12b. INDIVIDUAL'S SURNAME		_		
	FIRST PERSONAL NAME			\	
	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE S	SPACE IS FOR FILING OFFICE US	E ONLY
	Name of DEBTOR on related financing statement (Name of a current Debtor of one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or at				13): Provide only
	13a. ORGANIZATION'S NAME		1		
OR	13b. INDIVIDUAL'S SURNAME Ropp	FIRST PERSONAL NAME Delmar		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Sec FAF Moy	p, Delmar Lynn - HC 62 Box 62094 , Eureka, NV 89316  ured Party Name and Address:  RM CREDIT SERVICES OF AMERICA, PCA - PO BOX 2409 , Celle Irrigation Inc - 58 N Hwy 18 , Beryl, UT 84714  Royle Irrigation Inc	17. Descrip	tion of real estate:		
De	Name and address of a RECORD OWNER of real estate described in item 17 if Debtor does not have a record interest):  Imar L & Trennis L Ropp	A parc R53E; No. 4 a Martin Haywa Record thence	cel of land loc Commencing as shown on a, John,T. & I ard, on file in der,Eureka, N N 88°,12' 50 crly Line of s	nter Pivot LE13125 cated within Section 2 g at the NW Corner of the Parcel Map for Jer Becky O'Flaherty and the Office of the Eur Jevada as File No. 16. O" E, 188.47 feet, alon aid Parcel No. 4, to C Beginning; Thence c	f Parcel rry R. Curtis P. eka County 3256, g the orner No.

Debtor: Ropp, Delmar, Lynn

## **Exhibit for Real Estate**

## **17. Description of real estate:** Continued

N 88° 12',50" E, 86.46 feet, along said Northerly Line of Parcel No. 4 to Corner No. 2; Thence South 27.48,feet, to Corner No. 3; Thence East 30.00 feet, to,Corner No. 4; Thence North, 28.42 feet, to Corner No. 5, a point being on the Northerly Line of said Parcel No. 4; Thence N 88° 12' 50" E, 89.61,feet, along said Northerly Line of Parcel No. 4,,to Corner No. 5, a point being the Northeast Corner of said Parcel No. 4; Thence S 00° 13' 02",E, 100.28 feet, along the Easterly Line of said Parcel No. 4, to Corner No. 6; Thence S 88° 24;,43: W, 206.43 feet, to Corner No. 7; Thence N 00°,004 44" W, 99.57 feet to Corner No. 1, the Point of Beginning containing 0.454 acres, more or less.

Eureka County, NV

Real Estate Owner: Delmar L & Trennis L Ropp

Parcel # 007-370-46

