



FARM PRODUCTS AMENDMENT - UCC-3F

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE # _____

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.

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.

3. **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 assignor 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 one 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

6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME _____

OR

7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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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
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8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.

Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

Item No.	Product Code	County Produced Code	Crop Year(s), if less than All	Amount, if necessary	Unit
1.					
2.					

Additional information (not to exceed 150 characters and spaces):

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT** (name of assignor, if this is an Assignment).

9a. ORGANIZATION'S NAME _____

OR

9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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Debtor Signature(s): _____

Secured Party Signature: _____

Filing Office Copy



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7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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9a. ORGANIZATION'S NAME			
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

Debtor Signature(s): <hr/> <hr/>	Secured Party Signature: <hr/> <hr/>
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Acknowledgement Copy



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9a. ORGANIZATION'S NAME			
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

Debtor Signature(s):	Secured Party Signature:

Debtor Copy



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<p>Debtor Signature(s):</p> <p>_____</p> <p>_____</p>	<p>Secured Party Signature:</p> <p>_____</p> <p>_____</p>
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Secured Party Copy

Instructions for Farm Products Amendment (UCC-3F)

Please type or laser-print this form. Be sure it is completely legible. Read all instruction, especially instruction 1a; correct file number of initial Farm Products Filing is crucial. Follow instruction completely.

Fill in form very carefully; mistakes may have important legal consequences. If you have questions consult your attorney. Filing office cannot give legal advice.

Do not insert anything in the open space in the upper portion of this form; it is reserved for filing office use.

When properly completed, send Filing Office Copy with required fee to filing office.

If you need to use attachments use UCC-2F or plain sheets of 8-1/2 X 11 inch paper and put the name of the first Debtor at the top of each attached sheet.

Always complete items 1a and 9.

- A. To assist filing office personnel who may wish to communicate with filer, filer may provide information in item A. This item is optional.
- B. Complete item B if you want an acknowledgement copy sent to you. The copy will be returned in a window envelope to the address shown in item B. You may send the Acknowledgement Copy of this form with your filing or one dollar (\$1.00) to receive a computer generated copy.

1a. **File number:** Enter file number of initial Farm Products Filing to which this amendment relates. Enter only one file number.

Note: Show purpose of this Amendment by checking 2, 3, 4, 5 (in item 5 you must check two boxes) or 8; also complete items 6, 7 and/or 8 as appropriate. Filer may use this amendment to simultaneously accomplish both data changes (items 4, 5 and/or 8) and a Continuation (item 3), filer is still required to pay the fee for each individual action.

2. To terminate the effectiveness of the identified Farm Products Filing with respect to security interest(s) of authorizing Secured Party, check box 2. See instruction 9. No other activity may be combined with a termination.

3. To continue the effectiveness of the identified Farm Products Filing with respect to security interest(s) of authorizing Secured Party, check box 3. See instruction 9.

4. To assign (i) all of the assignor's interest under the identified Farm Products Filing, or (ii) a partial interest in the security interest covered by the identified Farm Products Filing, or (iii) assignor's full interest in some (but not all) of the collateral covered by the identified Farm Products Filing: Check box in item 4 and enter name of assignee in item 7a if assignee is an organization, or in item 7b, formatted as indicated, if assignee is an individual. Complete 7a or 7b, but not both. Also enter assignee's address in item 7c. Also enter name of assignor in item 9. If partial Assignment affects only some (but not all) of the collateral covered by the identified Farm Products Filing, filer may check appropriate box in item 8 and Indicate the affected collateral in item 8.

5, 6, 7. To change the name and/or address of a party: Check box in item 5 to indicate whether this Amendment amends information relating to a Debtor or a Secured Party; also check box in item 5 to indicate that this is a name and/or address change; also enter name of affected party (current record name, in case of a name change) in item 6a or 6b as appropriate; and also give new name (7a or 7b) and/or new address (7c) in item 7.

5, 6. To delete a party: Check box in item 5 to indicate whether deleting a Debtor or a Secured Party; also check box in item 5 to indicate that this is a deletion of a party; and also enter name (6a or 6b) of deleted party in item 6.

5, 7. To add a party: Check box in item 5 to indicate whether adding a Debtor or a Secured Party; also check box in item 5 to indicate that this is an addition of a party; also enter all required information in item 7: name (7a or 7b) and address (7c); also, if adding a Debtor, Tax ID# (7d), and additional organization Debtor information (7e-g) if added Debtor is an organization. Note: The preferred method for filing against a new Debtor (an individual or organization not previously of record as a Debtor under this file number) is to file a new Farm Products Filing (UCC-1F) and not an Amendment (UCC-3F).

8. **Collateral Change:** To change the collateral covered by the identified Farm Products Filing, describe the change in item 8. This may be accomplished either by describing the collateral to be added or deleted, as formatted by instructions 4b-f of UCC-1F, or by setting forth in full the collateral description (as formatted) as it is to be effective after the filing of this Amendment, indicating clearly the method chosen (check the appropriate box). If the space in item 8 is insufficient, use item 13 of Farm Products Addendum (UCC-2F). A partial release of collateral is a deletion. If, due to a full release of all collateral, filer no longer claims a security interest under the identified Farm Products Filing, check box 2 (Termination) and not box 8 (Collateral Change). If a partial assignment consists of the assignment of some (but not all) of the collateral covered by the identified Farm Products Filing, filer may indicate the assigned collateral in item 8, check the appropriate box in item 8, and also comply with instruction 4 of these instructions.

9. Always enter the name of the party of record authorizing this Amendment; this will be the Secured Party of record.

Debtor's Signature(s): Each individual debtor must sign if box 5 or the 'added' or 'restated' block in box 8 is checked. Corporate debtor must be signed by corporate officer. A Partnership debtor must be signed by a general partner.

Secured Party Signature: The secured party must sign.