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STATE OF CHEGON STATE OF OREGON VOI MAS Page 45423 Real Property - Form UCC-3A THIS FORM FOR COUNTY EN INC.

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J. R. Simplo: as True	ted to the county filing office	UNTY FILING OFFICER US Durstland to the Uniform Con any Name(s): an Life Insurance Compa	E UNLY Innercial Corta
J. R. Simplot Self Dec	laration of Metropolita	any Name(s): an Life Insurance Compa	4A. Assignee of Secured Party (if eny):
18. Debtor Mailing Address(es):	December 21. 1989	a arree Compa	my
PO Box 27 Boise, Idaho 83705-00	info-	Secured Party from which security	4B. Address of Assignee:
10ano 8370.7-00	27 1001 South Suite 103	245h Street West	- Assigned:
		ontana 59102	
	<u> </u>	i i	
This statement refers to original Fi	inancing Statement number, Vol.	MO2 TO COM	
			d: 12/30/93 19
-	any no longer claims a	security interest under the Face.	statement bearing the file number shown abo
ASSIGNMENT The	e Secured Party assigns to the Assigner to the Assignment bearing the Requirement	nee whose name and address is an	statement bearing the file number shown abo own, Secured Party's rights under the financi lescribe below)
CONTINUATION The	Officinal formation is a raimbar show	gnee whose name and address is sh wn above in the following property. (D	own, Secured Party's rights under the financi lescribe below)
	Statement Deann	g the file number shows at	
MELEASE FOR	m the collateral described in the fina	g the file number shown above is still xmitted within six months prior to exp noting statement bearing the file sum	effective. iration date. ber shown above, the Secured Party release ——Partial release - REI FASE DOES to
XX AMENDMENT FIRE	MINATE DEBT.	e: Release of all collateral _	iration date. ber shown above, the Secured Party release —— Partial release - RELEASE DOES NOT
PLE	ASE AMEND SECURED PART	ber shown above is amended as de-	TOTAL DOES NO
		ACRICAN	schood below: LITAN LIFE INSURANCE COMPAN TURAL TAVESTATION
A carbon, photographic or other reports		DENVER	RECTONAL OFFICE AND A STATEMENTS
A carbon, photographic or other reproduc	tion of this form, financing statemer	nt or security agreement 3445 DT	G PARKWAY. SUITE 020
METROPOLITAN LIFE INSURA	NCE COMPANY	ENGLEVO	C PARKAY SUTTE 920 Disancing statement under 085 Chapter 79.
5 t)E.C.		
Secured Party signature(s)	ames B. O'Riley Associ	ate Manager	
1. PLEASE TYPE THIS FORM.			ebtor signature(s)
2. If the space provided for any item(s) or sheets need to be presented to the coult. This form (UCC-3A) should be recorded that the country of the country	WST	RUCTIONS	
After the recording process is completed. The RECORDING FEE must accompanible sure that the financing statement has	Y the document. The said of the document		neets. Only one copy of such additional RM. orm cannot be filed with the Secretary of
Return to: (name	and address)		
METROPOLITAN LIFE INSURANCE COMPANY AGRICULTURAL INVESTMENTS		Recording Party contact ne	me: James B. O'Riley
PROVER REGIONAL OPER	OD.	Recording Party telephone r	number: (303)694-6280
J445 UIC PARKWAY CIT	TTP 020		
ENGLEWOOD COLORADO	80111		
Please do not type outside	9 of hrackstad		
10 94 09	TISCHARGO RISE.	$I_{\mathbb{R}^n}$	
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STATE OF OREGON: COUNTY OF	KI AMATU.		
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