Uniform Commercial Code — Statement of Continuation, Release, Amendment, Etc. — Form UCC-2 1. Type form. 2. If space is inadequate continue on additional sheet. 3. Enclose filing fee. 4. Filings in the Secretary of State's Office must contain either the debtor's federal employer identification number or social security number.

			Prepaid account number
Debtor (if individual, last nam	ne first) and address:	Debtor (if individual, last name fi	irst) and address:
LAND, A Kansas Pa			
1310 Wakarusa Dr	ive		
Lawrence, KS 660			
EIN	_ or SSN	FEIN	or SSN
			For filing officer
Secured Party and address ((Type information insid	(there may be more than one): le gray area)		
			FILED
Mercantile Bank of	Lawrence N.A.	AA AA	LOUIS COUNTY VICENCE
formerly known as	Rank of Lawrence		
The First National P.O. Box 428	Dalik UI Lawielice	m	95 JUL 10 PH 4: 05
Lawrence, Ks 6604	44		12 OF 10 EU 4- 03
		p p	EGISTER OF DEEDS
. Assignee and address if app	plicable		LONG I CITY OF DILLOG
, nearling and accides if app			
			()010980
			95255
B. Termination C. Release	The original Financing Statement bearing the above file number is still effective. The secured Party of record no longer claims security interest under the Financing Statem bearing the above file number. From the Collateral described in the Financing Statement bearing the above file number, the Secured Party of record releases the collateral be	E. Amendment	described below under the Financing Statement bearing the above file number to the Assignee whose name and address are shown above.
. This area is for describing o	hanges.		
	77 ASS	Number of A	dditional Sheets, if any.
		Mercantile Bank of	
		Derinder No	Ocher de
Sig	gnature of Debtor(s)		s) of Secured Party (ies)
(Necessary if any amendment	changes the classification or the value of collateral)	Jennifer Nitcher	

Form UCC-2 Form approved by Kansas Secretary of State