STATE OF GEORGIA Registre, Inc. UNIFORM COMMERCIAL CODE - FINANCING STATEMENT - FORM UCC-1 (Revised 1/1/1995) ANOKA, MN. 55303 Form must be typed. Read instructions on back before filling out form. THIS FINANCING STATEMENT IS PRESENTED TO A FILING OFFICER FOR FILING PURSUANT TO THE UNIFORM COMMERCIAL CODE, STATE OF GEORGIA. M Individual (Last, First, Middle Name) 1A. Debtor Name and Mailing Address: Business (Legal Business Name) arber, Phillip E. 00 Brandy Lane arpersville, Al. 35078 ☐ Check if exempt under item 6 1B. Enter Social Security /Tax ID Individual (Last, First, Middle Name) 2A. Debtor Name and Mailing Address: ☐ Business (Legal Business Name) ABOVE SPACE FOR RECORDING INFORMATION ONLY 2B. Enter Social Security /Tax ID # ______ 2C.

Check if exempt under Item 6 🔲 Individual (Last, First, Middle Name) 🔫 5. Assignee Name and Mailing Address ☐ Individual (Last, First, Middle Name) Susiness (Legal Business Name) 3A. Debtor Name and Making Address: Case Credit Corporation ☐ Business (Legal Business Name) 1D# 76-0394710 P.O. Box 292 Racine, Wi 53401-0292 6. Exceptions for Social Security/Tax ID# -- O.C.G.A. 11-9-402(9): Financing Statement filed to perfect a security interest in collateral already subject to a security interest in another jurisdiction 3C. Check if exempt under Item 6 38. Enter Social Security /Tax ID # _____ when it is brought into this state or when the debtor's location is changed to this state, or the debtor ☐ Individual (Last, First, Middle Name) 4. Secured Party Name and Mailing Address: is not required to have such a number. 7. Check Only if BOTH: (i) Collateral is consumer goods as defined in O.C.G.A. 11-9-109 and Business (Legal Business Name) (ii) the secured obligation is originally \$5,000 or less, and give maturity date (MONTH/DAY/ IcCranie Farm Equip. YEAR) or state "None"_____ '. O. Box 149 Tawkinsville, Ga. 31036 8. Check ONLY if applicable. A.

Collateral on Consignment. B. Collateral on Lease. 9C. Enter collateral code(s) from back of 9A. This financing statement covers the following types or items of collateral: form that best describes collateral covered by this filing: s/n 25655 0700 ne used CaseIH 475 harrow 1300 Amount of indebtedness \$2720.98 and all proceeds derived from the collateral described above Ref. # DLR # 61534 APP # 26420 9D. Number of additional sheets presented:______ 9B. D Products of collateral are also covered. 10. Check if applicable and include reasonable description of the real estate in Item 9A: A. Crops growing or to be grown. B. Minerals or the like (including oil and gas) or accounts subject to O.C.G.A. 11-9-103(5). C. Eixture filing pursuant to O.C.G.A. 11-9-313. 11. Name of the Record Owner(s) or Record Lessee(s) (if debtor does not have an interest of record in the real estate): 12. County or Counties in which the affected real estate is located (Must be identified if filing covers crops, mineral or fixtures): 13. This statement is filed without the debtor's signature to perfect a security interest in collateral (check only if applicable): A. \square already subject to a security interest in another jurisdiction when it was brought into this state or debtor's location changed to this state; B. I which is proceeds of the original collateral described above in which a security interest was perfected; C. () as to which the filling has lapsed; O. [] acquired after a change of debtor's name, identify or corporate structure; or E. 🗆 described in a security agreement / real estate mortgage attached hereto in accordance with O.C.G.A. 11-9-402(1). 15. Signature(s) of Secured Party(ies) 14. Signature(s) of Debtor(s) PHILLIP E. BARBER

16. Return Copy To: Name and Address

Case Credit Corporation
P.O. Box 292
Racine, WI 53401-0292
ATTENTION: Filings & Reg.

STATE OF GEORGIA - FINANCING STATEMENT

UCC-1 (REVISED 1/1/1995)

FORM MUST BE TYPED.
READ INSTRUCTIONS ON BACK
REFORE FILLING OUT FORM.