

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional) 1-888-427-8713
B. SEND ACKNOWLEDGEMENT TO : (Name and Address) JOHN DEERE CREDIT UCC DEPARTMENT P.O. BOX 6630 JOHNSTON, IA 50131-9982

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE # FILE NBR: 200502270950 DATE: 29APR05	1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS <input type="checkbox"/>
2. <input checked="" type="checkbox"/> 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. <input type="checkbox"/> 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. <input type="checkbox"/> 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 <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these two boxes. Also check <u>one</u> of the following boxes and provide appropriate information in items 6 and/or 7. <input type="checkbox"/> 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. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b <input type="checkbox"/> ADD name: Completed item 7a or 7b, and also item 7c; also completed items 7d - 7g (if applicable)	
6. CURRENT RECORD INFORMATION:	
OR	6a. ORGANIZATION'S NAME TATE EXCAVATION AND CONTRACTING CO.
	6b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:	
OR	7a. ORGANIZATION'S NAME
	7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX
7c. MAILING ADDRESS	
63 TOM HARVEY RD	CITY WESTERLY STATE RI POSTAL CODE 02891 COUNTRY USA
7d. TAX ID # SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR CORPORATION
7e. TYPE OF ORGANIZATION CORPORATION	7f. JURISDICTION OF ORGANIZATION RI
7g. ORGANIZATIONAL ID #, if any 129596	<input type="checkbox"/> NONE

8. AMENDMENT (COLLATERAL CHANGE): check only one box.
Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment) If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, of if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.

OR	9a. ORGANIZATION'S NAME JOHN DEERE CONSTR. EQUIP. CO
	9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10. OPTIONAL FILER REFERENCE DATA

RI 903355 10JAN07