

UCC-3 Form - CONTINUATION

Original File Number: **201109614000**

FILER INFORMATION

Full name: **KELLY CAMPBELL**

Email Contact at Filer: **KELLY.CAMPBELL@FARMCREDITEAST.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **FARM CREDIT EAST, ACA**

Mailing Address: **785 HARTFORD PIKE**

City, State Zip Country: **DAYVILLE, CT 06241 USA**

NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: FARM CREDIT EAST, ACA
