

# Competitive Intelligence: Lender in a Zip Code

*Report Generated: 2020-01-24*

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# COMPETITIVE INTELLIGENCE LIEN FILING REPORT FOR A SPECIFIC BANK IN A SPECIFIC ZIP CODE

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Development Version: This report presents manufactured data

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Overview of Liens for Lender Commerce Bank in Zip Code 65109 Since 2008-01-01.

## Number of Liens Filed

Liens Originated: 4

Liens Continued: 3

Liens Terminated: 4

## Open Liens for for Lender Commerce Bank in Zip Code 65109

*Open liens are liens for which origination and/or continuation—but not termination—filings exist in selected time frame, suggesting that the securing collateral has at least one primary lien holder.*

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### Open Liens for Lender Commerce Bank in Zip Code 65109 for UCC Transaction ID X130007343

Business Name	Date	Status	Lender
State Fair AG LLC	2013-01-04	ORIGINATION	Commerce Bank

### Open Liens for Lender Commerce Bank in Zip Code 65109 for UCC Transaction ID X11111111

Business Name	Date	Status	Lender
Pleasant Vly Charcoal	2014-09-01	ORIGINATION	Commerce Bank
Pleasant Vly Charcoal	2019-08-15	CONTINUATION	Commerce Bank

## Closed Liens for for Lender Commerce Bank in Zip Code 65109

*Closed liens are liens for which termination filings exist in the selected time frame—either with or without previous origination or continuation filings—suggesting that the collateral to secure the loan does not have a primary lien holder.*

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### Closed Liens for Lender Commerce Bank in Zip Code 65109 for UCC Transaction ID X130256666

Business Name	Date	Status	Lender
Pleasant Vly Charcoal	2013-08-07	ORIGINATION	Commerce Bank
Pleasant Vly Charcoal	2015-02-15	CONTINUATION	Commerce Bank
Pleasant Vly Charcoal	2019-07-28	TERMINATION	Commerce Bank

### Closed Liens for Lender Commerce Bank in Zip Code 65109 for UCC Transaction ID X130298453

Business Name	Date	Status	Lender
Pleasant Vly Charcoal	2013-09-17	ORIGINATION	Commerce Bank
Pleasant Vly Charcoal	2015-09-08	TERMINATION	Commerce Bank

### Closed Liens for Lender Commerce Bank in Zip Code 65109 for UCC Transaction ID E2009005065128

ucctransid	buycomp1	date	ucstatus	spcomp	lender_address
X130309916	Pleasant Vly Charcoal	2013-09-25	ORIGINATION	Hawthorn Bank	132 E. High St , Jefferson City ,
X130309916	Pleasant Vly Charcoal	2015-07-17	TERMINATION	Hawthorn Bank	132 E. High St , Jefferson City ,

### Closed Liens for Lender Commerce Bank in Zip Code 65109 for UCC Transaction ID X13029876

Business Name	Date	Status	Lender
Lindaman's Second Business	2015-07-15	CONTINUATION	Commerce Bank
Lindaman's Second Business	2019-09-28	TERMINATION	Commerce Bank

## Collateral Listings for Lender Commerce Bank in Zip Code 65109

Note: Collateral descriptions are representations only, pending access to the original Missouri Secretary of State bulk UCC lien filing data source.

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UCC Transaction ID	Business Name	Collateral
X130007343	State Fair AG LLC	KINZE 3200, SN: 682035
X130256666	Pleasant Vly Charcoal	DEERE 9410, SN: 680183
X130298453	Pleasant Vly Charcoal	CASE, SN: 19714
X130309916	Pleasant Vly Charcoal	DEERE XUV-825-I, SN: 67308
X130311446	Pleasant Vly Charcoal	DEERE 2025-R, SN: 110280
X11111111	Pleasant Vly Charcoal	Deere Zero-Turn Mower
E2009005065128	Meinke AG LLC	KUBOTA RTV-500, SN: 17324
E8189829	NA	CASE JX-75, SN: HFJ005550
X150203650	NA	KINZE 3500, SN: 101464
E150479053	Lowland Lawn & Lndscp Inc	2004 VERMEER 605-XL, SN: 1VRV141M331001766
X1349180	NA	2008 SUNFLOWER 1544-45, SN: 1544C08013
X13029876	Lindaman's Second Business	Kubota 9410, SN: 680184
X1302954321	Lindaman's Third Business	Deere, SN: 19714
X13032469	Lindaman's Fourth Business	Kubota 825-I, SN: 67309
X13032570	Lindaman's Fifth Business	Skywalker Lightsaber 19770530, SN: MH502

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## Original Missouri Secretary of State Filing Documents

*Filing documents obtained from Missouri Secretary of State*

**Note:** The original documents shown here are not the specific documents for the fictional borrower described in this sample report.

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**John R. Ashcroft**  
**Secretary of State**  
**State of Missouri**  
**UCC Filing Chain Report**

October 31, 2019

**File Number:** 1811092230481  
**Date Searched:** 10/31/2019 11:35:45 AM

**Lapse Date:** 11/09/2023 11:59:59 PM  
**Alt Filing Type:** UCC, UCC

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<b>File Number</b>	<b>Filing Date</b>	<b>Type</b>	<b>Page Count</b>
1811092230481	11/9/2018 3:11:09 PM	UCC1	1

**Debtor(s):**

Commercial: 3D LAWN & LANDSCAPE LLC  
20555 JOLLY LN  
WEBB CITY, MO 64870

**Secured Parties:**

Commercial: SOUTHWEST MISSOURI BANK  
P.O. BOX 814  
CARTHAGE, MO 64836

File Number: 1811092230481  
Date Filed: 11/9/2018 3:11 PM  
John R. Ashcroft  
Secretary of State

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Southwest Missouri Bank	(417) 358-9331
B. E-MAIL CONTACT AT FILER (optional)	
tingle@smbonline.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Southwest Missouri Bank PO Box 814 Carthage, MO 64836	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Page 1 of 1

1. **DEBTOR'S NAME:** Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in the line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1AD)

1a. ORGANIZATION'S NAME 3D LAWN & LANDSCAPE LLC					
OR	1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIALS	SUFFIX
1c. MAILING ADDRESS 20555 JOLLY LN		CITY WEBB CITY	STATE MO	POSTAL CODE 64870	COUNTRY USA

2. **DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in the line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1AD)

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIALS	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

3. **SECURED PARTY'S NAME** (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME SOUTHWEST MISSOURI BANK					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS P.O. BOX 814		CITY CARTHAGE	STATE MO	POSTAL CODE 64836	COUNTRY USA

4. **COLLATERAL:** This financing statement covers the following collateral:

EQUIPMENT: ALL EQUIPMENT INCLUDING, BUT NOT LIMITED TO, MACHINERY, VEHICLES, FURNITURE, FIXTURES, MANUFACTURING EQUIPMENT, FARM MACHINERY AND EQUIPMENT, SHOP EQUIPMENT, OFFICE AND RECORD KEEPING EQUIPMENT, PARTS AND TOOLS. THE PROPERTY INCLUDES ANY EQUIPMENT DESCRIBED IN A LIST OR SCHEDULE DEBTOR GIVES TO SECURED PARTY, BUT SUCH A LIST IS NOT NECESSARY TO CREATE OR PERFECT A VALID SECURITY INTEREST IN ALL OF DEBTOR'S EQUIPMENT INCLUDING, BUT NOT LIMITED TO 2006 CATERPILLAR SKID STEER WITH FORKS MODEL #252B SERIAL #CAT052BASCP02297

5. Check only if applicable and only one box: Collateral is  held in a Trust (see UCC1Ad, item 17 and Instructions)  being administered by a Decedent's Personal Representative

6a. Check only if applicable and only one box:

Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

6b. Check only if applicable and only one box:

Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA



**File Number: 1805311523243**  
**Date Filed: 5/31/2018 10:01 AM**  
**John R. Ashcroft**  
**Secretary of State**

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER [optional] <b>John Deere Financial</b> (888) 427-8713	
B. E-MAIL CONTACT AT FILER (optional) <b>jdfuncfilings@johndeere.com</b>	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <b>John Deere Financial</b> <b>6400 NW 86th Street PO Box 6630</b> <b>Johnston, IA 50131</b>	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. **DEBTOR'S NAME:** Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in the line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor Information in item 10 of the Financing Statement Addendum (Form UCC1AD)

1a. ORGANIZATION'S NAME <b>3D LAWN &amp; LANDSCAPE LLC</b>					
OR	1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIALS	SUFFIX
1c. MAILING ADDRESS <b>20555 JOLLY LN</b>		CITY <b>WEBB CITY</b>	STATE <b>MO</b>	POSTAL CODE <b>64870</b>	COUNTRY <b>USA</b>

2. **DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in the line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor Information in item 10 of the Financing Statement Addendum (Form UCC1AD)

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME <b>MELLIES</b>		FIRST PERSONAL NAME <b>DENNIS</b>	ADDITIONAL NAME(S)/INITIALS <b>LAWRENCE</b>	SUFFIX
2c. MAILING ADDRESS <b>20555 JOLLY LN</b>		CITY <b>WEBB CITY</b>	STATE <b>MO</b>	POSTAL CODE <b>64870</b>	COUNTRY <b>USA</b>

3. **SECURED PARTY'S NAME** (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME <b>DEERE CREDIT, INC.</b>					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS <b>6400 NW 86TH ST</b>		CITY <b>JOHNSTON</b>	STATE <b>IA</b>	POSTAL CODE <b>50131</b>	COUNTRY <b>USA</b>

4. **COLLATERAL:** This financing statement covers the following collateral:

John Deere Z970R COMMERCIAL ZTRAK S/N:  
060141  
The above described property is owned by the secured party and/or its assignee and is leased to the debtor.  
This statement is filed to give notice of secured party's (and/or its assignee) title to said property, together with  
(1)

5. Check only if applicable and only one box: Collateral is  held in a Trust (see UCC1Ad, item 17 and Instructions)  being administered by a Decedent's Personal Representative

6a. Check only if applicable and only one box:

Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

6b. Check only if applicable and only one box:

Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA

0000177465

**UCC FINANCING STATEMENT ADDENDUM****FOLLOW INSTRUCTIONS****9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on financing Statement; if line 1b was left blank**because individual Debtor name did not fit, check 

OR	9a. ORGANIZATION'S NAME <b>3D LAWN &amp; LANDSCAPE LLC</b>			
	9b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAME			
	ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

**10. DEBTOR'S NAME** -Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

OR	10a. ORGANIZATION'S NAME				
	10b. INDIVIDUAL'S SURNAME				
	INDIVIDUAL'S FIRST PERSONAL NAME				
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX

10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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11.  **ADDITIONAL SECURED PARTY'S NAME** or  **ASSIGNOR SECURED PARTY'S NAME:** Provide only one name (11a or 11b)

OR	11a. ORGANIZATION'S NAME				
	11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
	11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):**

all  
**attachments, accessories and components, repairs and improvements, (2) all accounts, general intangibles,  
 contract  
 rights and chattel paper relating thereto, and (3) all proceeds, thereto including, without limitation, insurance,  
 sale,  
 lease and rental proceeds, and proceeds of proceeds.**

13. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATEMENT: <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input type="checkbox"/> is filed as a fixture filing.
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	16. Description of real estate:

**17. MISCELLANEOUS:**



File Number: 1811092230481  
Date Filed: 11/9/2018 3:11 PM  
John R. Ashcroft  
Secretary of State

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Southwest Missouri Bank	(417) 358-9331
B. E-MAIL CONTACT AT FILER (optional)	
tingle@smbonline.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Southwest Missouri Bank PO Box 814 Carthage, MO 64836	

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Page 1 of 1

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1c. MAILING ADDRESS 20555 JOLLY LN		CITY WEBB CITY	STATE MO	POSTAL CODE 64870	COUNTRY USA

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6a. Check only if applicable and only one box:

Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

6b. Check only if applicable and only one box:

Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA



John R. Ashcroft  
Secretary of State  
State of Missouri  
UCC Filing Chain Report

October 31, 2019

File Number: 1805311523243  
Date Searched: 10/31/2019 11:40:47 AM

Lapse Date: 05/31/2023 11:59:59 PM  
Alt Filing Type: UCC, UCC

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File Number	Filing Date	Type	Page Count
1805311523243	5/31/2018 10:01:13 AM	UCC1	3

Debtor(s):

Commercial: 3D LAWN & LANDSCAPE LLC  
20555 JOLLY LN  
WEBB CITY, MO 64870

Personal: MELLIES, DENNIS, LAWRENCE  
20555 JOLLY LN  
WEBB CITY, MO 64870

Secured Parties:

Commercial: DEERE CREDIT, INC.  
6400 NW 86TH ST  
JOHNSTON, IA 50131

**File Number: 1805311523243**  
**Date Filed: 5/31/2018 10:01 AM**  
**John R. Ashcroft**  
**Secretary of State**

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER [optional] <b>John Deere Financial (888) 427-8713</b>	
B. E-MAIL CONTACT AT FILER (optional) <b>jdfuncfilings@johndeere.com</b>	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <b>John Deere Financial 6400 NW 86th Street PO Box 6630 Johnston, IA 50131</b>	

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OR	1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIALS	SUFFIX
1c. MAILING ADDRESS <b>20555 JOLLY LN</b>		CITY <b>WEBB CITY</b>	STATE <b>MO</b>	POSTAL CODE <b>64870</b>	COUNTRY <b>USA</b>

2. **DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in the line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor Information in item 10 of the Financing Statement Addendum (Form UCC1AD)

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME <b>MELLIES</b>		FIRST PERSONAL NAME <b>DENNIS</b>	ADDITIONAL NAME(S)/INITIALS <b>LAWRENCE</b>	SUFFIX
2c. MAILING ADDRESS <b>20555 JOLLY LN</b>		CITY <b>WEBB CITY</b>	STATE <b>MO</b>	POSTAL CODE <b>64870</b>	COUNTRY <b>USA</b>

3. **SECURED PARTY'S NAME** (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME <b>DEERE CREDIT, INC.</b>					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS <b>6400 NW 86TH ST</b>		CITY <b>JOHNSTON</b>	STATE <b>IA</b>	POSTAL CODE <b>50131</b>	COUNTRY <b>USA</b>

4. **COLLATERAL:** This financing statement covers the following collateral:

John Deere Z970R COMMERCIAL ZTRAK S/N:  
060141  
The above described property is owned by the secured party and/or its assignee and is leased to the debtor.  
This statement is filed to give notice of secured party's (and/or its assignee) title to said property, together with  
(1)

5. Check only if applicable and only one box: Collateral is  held in a Trust (see UCC1Ad, item 17 and Instructions)  being administered by a Decedent's Personal Representative

6a. Check only if applicable and only one box:

Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

6b. Check only if applicable and only one box:

Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA

0000177465

**UCC FINANCING STATEMENT ADDENDUM****FOLLOW INSTRUCTIONS****9. NAME OF FIRST DEBTOR:** Same as line 1a or 1b on financing Statement; if line 1b was left blankbecause individual Debtor name did not fit, check 

OR	9a. ORGANIZATION'S NAME <b>3D LAWN &amp; LANDSCAPE LLC</b>	
	9b. INDIVIDUAL'S SURNAME	
	FIRST PERSONAL NAME	
	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

**10. DEBTOR'S NAME** -Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

OR	10a. ORGANIZATION'S NAME				
	10b. INDIVIDUAL'S SURNAME				
	INDIVIDUAL'S FIRST PERSONAL NAME				
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
10c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

11.  **ADDITIONAL SECURED PARTY'S NAME** or  **ASSIGNOR SECURED PARTY'S NAME:** Provide only one name (11a or 11b)

OR	11a. ORGANIZATION'S NAME					
	11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
	11c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

**12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):**

all  
**attachments, accessories and components, repairs and improvements, (2) all accounts, general intangibles,  
 contract  
 rights and chattel paper relating thereto, and (3) all proceeds, thereto including, without limitation, insurance,  
 sale,  
 lease and rental proceeds, and proceeds of proceeds.**

13. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATEMENT: <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input type="checkbox"/> is filed as a fixture filing.
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	16. Description of real estate:

**17. MISCELLANEOUS:**





**File Number: 1805311523243**  
**Date Filed: 5/31/2018 10:01 AM**  
**John R. Ashcroft**  
**Secretary of State**

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER [optional] <b>John Deere Financial</b> (888) 427-8713	
B. E-MAIL CONTACT AT FILER (optional) <b>jdfuncfilings@johndeere.com</b>	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <b>John Deere Financial</b> <b>6400 NW 86th Street PO Box 6630</b> <b>Johnston, IA 50131</b>	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Page 1 of 3

1. **DEBTOR'S NAME:** Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in the line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor Information in item 10 of the Financing Statement Addendum (Form UCC1AD)

1a. ORGANIZATION'S NAME <b>3D LAWN &amp; LANDSCAPE LLC</b>					
OR	1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIALS	SUFFIX
1c. MAILING ADDRESS <b>20555 JOLLY LN</b>		CITY <b>WEBB CITY</b>	STATE <b>MO</b>	POSTAL CODE <b>64870</b>	COUNTRY <b>USA</b>

2. **DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in the line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor Information in item 10 of the Financing Statement Addendum (Form UCC1AD)

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME <b>MELLIES</b>		FIRST PERSONAL NAME <b>DENNIS</b>	ADDITIONAL NAME(S)/INITIALS <b>LAWRENCE</b>	SUFFIX
2c. MAILING ADDRESS <b>20555 JOLLY LN</b>		CITY <b>WEBB CITY</b>	STATE <b>MO</b>	POSTAL CODE <b>64870</b>	COUNTRY <b>USA</b>

3. **SECURED PARTY'S NAME** (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME <b>DEERE CREDIT, INC.</b>					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS <b>6400 NW 86TH ST</b>		CITY <b>JOHNSTON</b>	STATE <b>IA</b>	POSTAL CODE <b>50131</b>	COUNTRY <b>USA</b>

4. **COLLATERAL:** This financing statement covers the following collateral:

John Deere Z970R COMMERCIAL ZTRAK S/N:  
060141  
The above described property is owned by the secured party and/or its assignee and is leased to the debtor.  
This statement is filed to give notice of secured party's (and/or its assignee) title to said property, together with  
(1)

5. Check only if applicable and only one box: Collateral is  held in a Trust (see UCC1Ad, item 17 and Instructions)  being administered by a Decedent's Personal Representative

6a. Check only if applicable and only one box:

Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

6b. Check only if applicable and only one box:

Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA

0000177465

**UCC FINANCING STATEMENT ADDENDUM****FOLLOW INSTRUCTIONS****9. NAME OF FIRST DEBTOR:** Same as line 1a or 1b on financing Statement; if line 1b was left blankbecause individual Debtor name did not fit, check 

OR	9a. ORGANIZATION'S NAME <b>3D LAWN &amp; LANDSCAPE LLC</b>	
	9b. INDIVIDUAL'S SURNAME	
	FIRST PERSONAL NAME	
	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

**10. DEBTOR'S NAME** -Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

OR	10a. ORGANIZATION'S NAME			
	10b. INDIVIDUAL'S SURNAME			
	INDIVIDUAL'S FIRST PERSONAL NAME			
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX

10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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11.  **ADDITIONAL SECURED PARTY'S NAME** or  **ASSIGNOR SECURED PARTY'S NAME:** Provide only one name (11a or 11b)

OR	11a. ORGANIZATION'S NAME				
	11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
	11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):**

all  
**attachments, accessories and components, repairs and improvements, (2) all accounts, general intangibles,  
 contract  
 rights and chattel paper relating thereto, and (3) all proceeds, thereto including, without limitation, insurance,  
 sale,  
 lease and rental proceeds, and proceeds of proceeds.**

13. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATEMENT: <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input type="checkbox"/> is filed as a fixture filing.
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	16. Description of real estate:

**17. MISCELLANEOUS:**



File Number: 1811092230481  
Date Filed: 11/9/2018 3:11 PM  
John R. Ashcroft  
Secretary of State

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER [optional] <b>Southwest Missouri Bank</b> (417) 358-9331
B. E-MAIL CONTACT AT FILER (optional) <b>tingle@smbonline.com</b>
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <b>Southwest Missouri Bank PO Box 814 Carthage, MO 64836</b>

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Page 1 of 1

1. **DEBTOR'S NAME:** Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in the line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1AD)

1a. ORGANIZATION'S NAME <b>3D LAWN &amp; LANDSCAPE LLC</b>	OR			
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIALS	SUFFIX	
1c. MAILING ADDRESS <b>20555 JOLLY LN</b>	CITY <b>WEBB CITY</b>	STATE <b>MO</b>	POSTAL CODE <b>64870</b>	COUNTRY <b>USA</b>

2. **DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in the line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1AD)

2a. ORGANIZATION'S NAME	OR			
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIALS	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. **SECURED PARTY'S NAME** (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME <b>SOUTHWEST MISSOURI BANK</b>	OR			
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS <b>P.O. BOX 814</b>	CITY <b>CARTHAGE</b>	STATE <b>MO</b>	POSTAL CODE <b>64836</b>	COUNTRY <b>USA</b>

4. **COLLATERAL:** This financing statement covers the following collateral:

EQUIPMENT: ALL EQUIPMENT INCLUDING, BUT NOT LIMITED TO, MACHINERY, VEHICLES, FURNITURE, FIXTURES, MANUFACTURING EQUIPMENT, FARM MACHINERY AND EQUIPMENT, SHOP EQUIPMENT, OFFICE AND RECORD KEEPING EQUIPMENT, PARTS AND TOOLS. THE PROPERTY INCLUDES ANY EQUIPMENT DESCRIBED IN A LIST OR SCHEDULE DEBTOR GIVES TO SECURED PARTY, BUT SUCH A LIST IS NOT NECESSARY TO CREATE OR PERFECT A VALID SECURITY INTEREST IN ALL OF DEBTOR'S EQUIPMENT INCLUDING, BUT NOT LIMITED TO 2006 CATERPILLAR SKID STEER WITH FORKS MODEL #252B SERIAL #CAT052BASCP02297

5. Check only if applicable and only one box: Collateral is  held in a Trust (see UCC1Ad, item 17 and Instructions)  being administered by a Decedent's Personal Representative

6a. Check only if applicable and only one box:

Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

6b. Check only if applicable and only one box:

Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA

File Number: 1311183053203  
Date Filed: 11/18/2013 11:01:09 AM  
Jason Kander  
Secretary of State

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER [optional] <b>Teri Beeler</b> (417) 358-9331
B. E-MAIL CONTACT AT FILER (optional) <b>tbeeler@smbonline.com</b>
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <b>Southwest Missouri Bank 300 W Third Carthage, MO 64836</b>

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Page 1 of 2

1. **DEBTOR'S NAME:** Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in the line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor Information in item 10 of the Financing Statement Addendum (Form UCC1AD)

1a. ORGANIZATION'S NAME				
OR				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIALS		SUFFIX
<b>Mellies</b>	<b>Dennis</b>	<b>L.</b>		
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
<b>20555 Jolly Ln.</b>	<b>Webb City</b>	<b>MO</b>	<b>64870</b>	<b>USA</b>

2. **DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in the line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor Information in item 10 of the Financing Statement Addendum (Form UCC1AD)

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIALS		SUFFIX
<b>Mellies</b>	<b>Anita</b>			
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
<b>20555 Jolly Ln.</b>	<b>Webb City</b>	<b>MO</b>	<b>64870</b>	<b>USA</b>

3. **SECURED PARTY'S NAME** (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME <b>SOUTHWEST MISSOURI BANK</b>				
OR				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
<b>P.O. BOX 814</b>	<b>CARTHAGE</b>	<b>MO</b>	<b>64836</b>	<b>USA</b>

4. **COLLATERAL:** This financing statement covers the following collateral:

2011 JOHN DEERE DIESEL ZERO POWER TURN MOWER MODEL 999, SER. #TC997SB055516

5. Check only if applicable and only one box: Collateral is  held in a Trust (see UCC1Ad, item 17 and Instructions)  being administered by a Decedent's Personal Representative

6a. Check only if applicable and only one box:

Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

6b. Check only if applicable and only one box:

Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA

**Mellies**

**UCC FINANCING STATEMENT ADDITIONAL PARTY**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

**18. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT**

18a. ORGANIZATION'S NAME

OR

18b. INDIVIDUAL'S SURNAME

**Mellies**

FIRST PERSONAL NAME

**Dennis**

ADD'L NAME(S), SUFFIX

**L.**

19. MISCELLANEOUS:

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**20. ADDITIONAL DEBTOR'S NAME** - insert only one name (20a or 20b) - do not abbreviate

20a. ORGANIZATION'S NAME

**DBA 3 D LAWN CARE**

OR

20b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIALS

SUFFIX

20c. MAILING ADDRESS

**20555 JOLLY LN.**

CITY

**WEBB CITY**

STATE

**MO**

POSTAL CODE

**64870**

COUNTRY

**USA**