Submit this form and fee \$10.00 per form, except Termination

2000 AUG 28 AM 11:28

MTC 44 339

KLAMATH COUNTY CLERK orporation Division - UCC

Public Service Building

255 Capitol Street NE, Suite 151 Salem, OR 97310-1327 (503) 986-2200 Facsimile (503) 373-1166 THIS SPACE FOR OFFICE USE ONLY

J.

## UCC-3 STATEMENT OF TERMINATION, CONTINUATION, ASSIGNMENT, RELEASE, AMENDMENT PLEASE TYPE OR WRITE LEGIBLY. READ INSTRUCTIONS BEFORE FILLING OUT FORM

This Financing Statement is presented to filing officer pursuant to the Uniform Commercial Code. This financing statement remains effective for a period of five years from the date of filing, unless extended for additional periods as provided for by ORS Chapter 79. A carbon, photographic

A. THIS STATEMENT REFERS TO ORIGINAL FINANCING STATEMENT					G. COLLATERAL
No	o: M00-15803	_ Date Filed Rec	Filed Recorded 5/2/00		This area can be used in listing collateral to be Released, Amendment description and other
В.	. TYPE OF AMENDMENT				information.
	TERMINATION (NO FEE). The Secu interest under the financing statement b				
	☐ CONTINUATION. Submitted within si	x months prior to	expiration date.		
	☐ ASSIGNMENT. The Secured Party ass is shown in SECTION E and bearing the	•		ress	
	RELEASE. RELEASE DOES NOT TER in the financing statement bearing the fil releases the following: (describe in SEC	e number shown in			
	Choose One:	of Collateral	Partial Release	•••	
	■ AMENDMENT. Financing statement be amended as described in SECTION G.				
C.	DEBTOR NAME(S)	******		<u></u>	
1.	CAN AM RETAIL PARTNERS/KLAMATH F	ALLS, LLC		<u> </u>	
2.				<del></del>	
3.					
	BTOR MAILING ADDRESS:				
	IOENIX, AZ 85016 SECURED PARTY(IES) NAME AND ADDR	RESS			
	S. BANK NATIONAL ASSOCIATION 11 S. CAPITOL BLVD., STE. 601				
	D BOX 8247				
	DISE, ID 83733-8247				
Co	entact Name: Allison Woods	Phone	No. <u>208-383-7644</u>		
Ē.	ASSIGNEE NAME AND ADDRESS (if any)			<del></del>	
	•				
Co	ntact Name:	Phone No.		<del></del>	
F.	SIGNATURES. In accordance with ORS S U.S. BANK NATIONAL ASSOCIATION	tatutes, ALL SECI	JRED PARTIES mu	st sign UCC-3 Fili	ngs.
	By: Tomi Usiga Tami Grigsby, Assistant Vice President	ely	Ву:		
	By: Secured Party(ies) Signate	ure	By:	Debto	r Signature(s) (if required)
	RETURN COPY TO: (name and address)				
	U.S. BANK NATIONAL ASSOCIATION	NC		] ,	State of Oregon, County of Klamath

**Commercial Real Estate Loan Administration** 101 S. Capitol Blvd., Suite 601 Boise, ID 83702 Attn: Allison

Recorded 08/28/00, at //:28 c m. In Vol. M00 Page 3/447 Linda Smith, Fee\$\_2/00 County Clerk