

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTION (FRONT AND BACK) carefully

A. NAME & PHONE OF CONTACT AT FILER (optional)
 MELISSA DAVIS 1-800-648-8026 1766003

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

PY Diversified Financial Services, Inc.
 14010 FNB Pkwy, Ste. 205
 Omaha, NE 68154

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #

28437 VOL M96 PG 36123 KLAMATH COUNTY 11/18/96

1b. This FINANCING STATEMENT AMENDMENT is
☒ to be filed [for record] (or recorded) in the
 REAL ESTATE RECORDS

2. 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. ☒ 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. 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 ☐ Debtor or ☐ Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

☐ 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. ☐ DELETE name: Give record name To be deleted in item 6a or 6b. ☐ ADD name: Complete item 7a or 7b, and also Item 7c; also complete items 7d-7g (if applicable)

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME
 OREM & SON, INC.

OR

6b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

7d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any ☐ NONE

8. AMMENDMENT (COLLATERAL CHANGE): check only one box.

Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned

See Attached Addendum

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, or if this is a Termination authorized by a Debtor, check here ☐ and enter name of DEBTOR authorizing this Amendment.

9a. ORGANIZATION'S NAME

OR

Diversified Financial Services, Inc.

9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10. OPTIONAL FILER REFERENCE DATA

26- OREM & SON, INC.

52738

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)
28437

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)

12a. ORGANIZATION'S NAME DIVERSIFIED FINANCIAL SERVICES, INC.

OR

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME, SUFFIX

13. Use this space for additional information

DEBTOR NAME: OREM & SON, INC.
 RECORD OWNER: OREM LAND COMPANY
 LEGAL DESCRIPTION: NW1/4 SEC 9, T 41S, R 11E WILLAMETTE
 MERIDIAN, KLAMATH COUNTY, WA

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

State of Oregon, County of Klamath
 Recorded 10/17/01 at 8:29a. m.
 In Vol. M01 Page 52737
 Linda Smith,
 County Clerk Fee \$ 26⁰⁰