03 D	EC 26 AM8:29	•						
				Vol	M03	Page 932	26 9	
gap as	म्बर्ग्या च स्थापन १८४६ छ।							
UCC FINANCING STATEMENT AMENDMENT				Recorded 1	State of Oregon, County of Klamath Recorded 12/26/03 8:29 a m			
FOLLOW INSTRUCTIONS (front and back) CAREFULLY				Vol M03 Pg	Vol M03 Pg_ 93269			
A. NAME & PHONE OF CONTACT AT FILER (optional) Chris Winther-Helms (559) 265-6341				Linda Smith	Linda Smith, County Clerk Fee \$ _2/60 # of Pgs /			
		IENT TO: (Name and Address)		# 01 Pgs _/				
J. 321	TO ACKNOWLEDGIN	ETT 10. (Maile dila Maile del						
	Bank of	America, N.A.						
1	€ CA1-520	0-01-01						
	' P.O. Box	6179 CA 93703-6179						
				THE ABOVE S	SPACE IS F	OR FILING OFFICE I	USE ONLY	
1a. INI	TIAL FINANCING STAT	EMENT FILE #				FINANCING STATEME		
M85/	6061 Filed Apri	l 26, 1985			be filed (for record) (o L ESTATE RECORDS	r recorded) in the		
2. 🛛	TERMINATION: Effect	tiveness of the Financing Statement identified	above is terminated with respect	to security interest(s) of the Se	cured Party	authorizing this Termin	stion Statement.	
3. 🔲		fectiveness of the Financing Statement identifi tional period provided by applicable law.	ied above with respect to securit	y interest(s) of the Secured Part	y authorizing	this Continuation State	ament js	
4.		r partial): Give name of assignee in item 7a o	r 7b and address os asignee in it	em 7c; and also give name of a	ssignor in ite	m 9.		
	•	INFORMATION): This Amendment affects		of record. Check only one of t	hese two bo	xes.		
Also		wing three boxes <u>and</u> provide information in it address: Give current record name in item 6		ELETE name: Give record name	ADI) name: Complete item	7a or 7b. and also	
	name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c to be deleted in item 6a or 6b 7c; also complete items 7d-7g (if applicable)							
6. CU	B. CURRENT RECORD INFORMATION: 68. ORGANIZATION'S NAME							
OR	Jespersen-Edgewood, Inc.							
	6b. INDIVIDUAL'S LA	ST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX	
7. CH.	CHANGED (NEW) OR ADDED INFORMATION:						<u> </u>	
7a. ORGANIZATION'S NAME								
OR	7b. INDIVIDUAL'S LA	ST NAME	FIRST NAME		MIDDLE N	AME	SUFFIX	
7c. M/	AILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY	
7d. TA	X ID#: SSN OR EIN	ADD'L INFO RE 76. TYPE OF ORGANIZATION DEBTOR	TION 7f. JURISDICTIO	ON OF ORGANIZATION	7g. ORGA	NIZATIONAL ID #, if an	y NONE	
		TERAL CHANGE): check only one box.			<u> </u>		110142	
Des	cribe collateral 🔲 dele	eted or added, or give entire restated	collateral description, or describe	collateral assigned.				
9. NA	ME OF SECURED PA	ARTY OF RECORD AUTHORIZING THIS	AMENDMENT (name of assigne	or, if this is an Assignment). If t	this is an Am	endment authorized by	a Debtor which	
	collateral or adds the a	uthorizing Debtor, or if this is a Termination au						
OR	9a. ORGANIZATION'S Bank of Americ							
J.,	96. INDIVIDUAL'S LA		FIRST NAME		MIDDLE	NAME	SUFFIX	
	PTIONAL REFERENCE		State of Occasion					
Jes	hersen-FageMood	I, Inc. #1442 Klamath County, S	state of Oregon					