3939 South 6th Street, No. 146 Klamath Falls, OR 97603 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INTIAL FINANCING STATEMENT FILE # RECORDED IN No. 1. M00, Page 24927, Klamath County TERMINATION: Effectiveness of the Financing Statement Identified above is terminated with respect to security interest(s) of the Secured Party sufforting this Termination Statement CONTINUATION: Effectiveness of the Financing Statement Identified above with respect to security interest(s) of the Secured Party sufforting this Continuation Statement for the additional period provided by applicable law. A SASIGNMENT: (full or partial; Give names of sestingnes in item 7s or 7b and address of sestingnes in item 7c, and also give name of sestingnes in item 9. IENDIMENT (PARTY INFORMATION): The Amendment affects Debtor gr Secured Party of record. Check only grig of these two boxes. In CHANGE (Insert a partial): Give names of sestingnes in item 7s or 7b and address of sestingnes in item 7c, and also give name of sestingnes in item 9. IENDIMENT (PARTY INFORMATION): The Amendment affects Debtor gr Secured Party of record. Check only grig of these two boxes. In CHANGE IN INFORMATION: The Amendment affects Debtor gr D	3939 South 6th Street, No. 146 Klamath Falls, OR 97603 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY Interest of the Properties of th	<u>).</u> N	C FINANCING STATEMENT AMENDMENT OW INSTRUCTIONS (front and back) CAREFULLY AME & PHONE OF CONTACT AT FILER [optional] [effrey H. Keeney / 503-802-2025 END ACKNOWLEDGEMENT TO: (Name and Address)		State of	Oreg d 01/	on, Co 23/200 4/36	0	043 Klamath	•
Klamath Falls, OR 97603 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY NITIAL FINANCING STATEMENT FILE # Recorded in Vol. M-00, Page 24927, Klamath County TERMINATION: Effectiveness of the Financing Statement Identified above is terminated with respect to security interest(s) of the Secured Party sufforcing this Termination Statement CONTINUATION: Effectiveness of the Financing Statement Identified above with respect to security interest(s) of the Secured Party sufforcing this Continuation Statement CONTINUATION: Effectiveness of the Financing Statement Identified above with respect to security interest(s) of the Secured Party sufforcing this Continuation Statement CONTINUATION: Effectiveness of the Financing Statement Identified above with respect to security interest(s) of the Secured Party sufforcing this Continuation Statement CONTINUATION: Effectiveness of the Financing Statement Identified above with respect to security interest(s) of the Secured Party sufforcing this Continuation Statement is continued for the additional period provided by applicable line. ASSIGNMENT: (flat or partial): Give name of sessignes in Item 7a or 7b and address of sessignes in Item 7c; and also give name of assignor in Item 9. IERDINENT (PARTY INFORBIATION): This Amendment affects Debtor or Debtor or Debtor or Item 9. IERDINENT (PARTY INFORBIATION): This Amendment affects Debtor or Debtor or Item 9. IERDINENT RECORD INFORMATION: ADDRESS Debtor or Debtor or Debtor or Debtor or Debtor or Debtor Debto	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY		Richard A. Dixon							
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ME 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			DRGANIZATION DEBTOR MENDMENT (COLLATERAL CHANGE): check only one box. secribe colleteral deleted or added, or give entire restated colleteral d	FIRST NA CITY 71. JURISI	ME DICTION OF ORGANIZA secribe collateral sasign	ed.	MIDDLE STATE 7g. ORG	NAME POSTAL C ANIZATION	ALID#, War	SUFFIX COUNTRY NY
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steral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here 🔲 and enter name of DESTOR authorizing this Amendment.	ea. organization's name Rogue Partners Limited Partnership		HANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME DPL INFO RE	FIRST NA CITY 77. JURISI Description, or description, or description and descr	ME DICTION OF ORGANIZA secribe colleteral sealgnor assignment of DEBTOR author	ed.	MIDDLE STATE 7g. ORG	NAME POSTAL C ANIZATION	ALID#, War	SUFFIX COUNTRY NON