ALFORD GARY D. 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE				•	<u>M</u> L	<u> 14 Page </u>	11202
Recorded 02/26/2004 Vol M04 Pg						-	
Recorded 02/26/2004 Vol M04 Pg				State of	Orego	n, County of K	lamath
COLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER (potional) JACKIE MILES (502) 721-9446 B. SEND ACKNOWLEDGMENT TO: (Name and Address) AGRICULTURAL MORTGAGE COMPANY OF AMERICA, LLC 2209 RIVER ROAD LOUISVILLE, KY 40206 In Iterative and the second of the second							
A NAME & PHONE OF CONTACT AT FILER [optional] JACKIE MILES (502) 721-9446 B. SEND ACKNOWLEDGMENT TO: (Name and Address) AGRICULTURAL MORTGAGE COMPANY OF AMERICA, LLC 2209 RIVER ROAD LOUISVILLE, KY 40206 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY Ib. This FINANCING STATEMENT FILES MO1 - 11230 TERMINATION: Effectiveness of the Financing Statement Identified above is terminated with respect to security interest(s) of the Secured Party authorizing the Termination Statement is continued for the additional period provided by applicable lew. ASSIGNMENT (full or partial): Ohe name of assignes in item 7s or 7b and address of assignes in item 7s; and alto give name of assignor in item 8. AMENDMENT (PARTY INFORMATION): This Amendment effects Debtor or Statement Party authorizing three boxes and provide appropriate information in items 6 andror 7. GHANGE name andror address. Please refer to the detailed instructions Instruction Interest General Party authorized Statement Party	CC FINANCIN	G STATEMENT AMEN	DMENT				
JACKIE MILES (502) 721-9446 B. SEND ACKNOWLEDGMENT TO: (Name and Address) AGRICULTURAL MORTGAGE COMPANY OF AMERICA, LLC 2209 RIVER ROAD LOUISVILLE, KY 40206 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1s. INITIAL FINANCING STATEMENT FILE 8 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1s. INITIAL FINANCING STATEMENT FILE 8 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1s. INITIAL FINANCING STATEMENT AMEND 1							
B. SEND ACKNOWLEDGMENT TO: (Name and Address) AGRICULTURAL MORTGAGE COMPANY OF AMERICA, LLC 2209 RIVER ROAD LOUISVILLE, KY 40206 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1s. INITIAL FINANCING STATEMENT FILE 8 MD 4 - 112 30 This Financing Statement Identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional period provided by applicable single formation in items 6 and/or 7. ABOSIGNMENT (full or partial): Give name of assignee in item 7s or 7b and address of assignee in item 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or CHANGE provide plants provide appropriate information in items 6 and/or 7. CHANGE prame and/or address Please reter this detailed instructions B. CHANGE prame and/or address Please reter this detailed instructions CHANGE prame and/or address Please reter this detailed instructions B. CHANGE prame and/or address Please reter this detailed instructions B. CHANGE prame and/or address Please reter this detailed instructions B. CHANGE prame and/or address Please reter this detailed instructions B. CHANGE prame and/or address Please reter this detailed instructions B. CHANGE prame and/or address Please reter this detailed instructions B. CHANGE provided by a provide appropriate information in items 6 and 60. B. CHANGE Prame and/or address Please reter this detailed instructions B. CHANGE Prame and/or address Please reter this detailed instructions B. CHANGE Prame and/or address Please reter this detailed instructions B. CHANGE Prame and/or address Please reter this detailed instructions B. CHANGE Prame and/or address Please reter this detailed instructions B. CHANGE Prame and/or address Please reter this detailed instructions B. CHANGE Prame and/or address of a party. B. CHANGE Prame and/or address of a party. B. CHANGE Prame Pram				Fee \$	2600	_ # of Pgs _ Z	-
AGRICULTURAL MORTGAGE COMPANY OF AMERICA, LLC 2209 RIVER ROAD LOUISVILLE, KY 40206 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY In This FINANCING STATEMENT AMEND OFFICE USE ONLY In This FINANCING STATEMENT AMEND To be filled fillor recorded, for eccorded in the Top office of the Secured Party authorizing the Termination Statement identified above with respect to security interest(s) of the Secured Party authorizing this Termination 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 lew. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in flam 7c; and also give name of assignor in item 9. AMERICA, LET THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY REAL ESTATE RECORDS. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in flam 7c; and also give name of assignor in item 9. AND ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in flam 7c; and also give name of assignor in item 9. AND ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in flam 7c; and also give name of assignor in item 9. AND CHANGE name and/or address. Please refer to the detailed instructions in herms 6 and/or 7. CHANGED (Full OFFICE USE ONLY) Generally record in flam 6a or 6b. ALFORD CHANGED (NEW) or ADDED INFORMATION: 7a. ORGANIZATION'S NAME ALFORD CHANGED (NEW) or ADDED INFORMATION: 7a. ORGANIZATION'S NAME U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE							
AMERICA, LLC 2209 RIVER ROAD LOUISVILLE, KY 40206 In Initial Financing Statement File # 10.30 15. This Financing Statement Identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is Continued for the additional period provided by applicable law. ASSIGNMENT (PARTY INFORMATION): The Amendment effects Debtor or Secured Party of record, or these two boxes.		Ziziri i e. (valile alia radioos)					
AMERICA, LLC 2209 RIVER ROAD LOUISVILLE, KY 40206 International Continuation of the secured Party authorizing the Termination Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is Continuation Statement identified above with respect to security interest(s) of the Secured Party authorizing this Termination Statement is Continuation. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Termination Statement is Continuated for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7 or 70 and address of assignee in item 7c; and also give name of assigner in item 8. AMENDMENT (PARTY INFORMATION): This Amendment effects 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: Piesses refer to the detailed instructions DELETE name: Give record name ADD name: Complete item 7a or 7b, and also it in records to be detailed instructions DELETE name: Give record name ADD name: Complete item 7a or 7b, and also it in tem 8a or 6b. Biocomolete items 7a or 7b, and also it is desired in item 8a or 6b. Suff ORANY D. CHANGE (INEW) OR ADDED INFORMATION: Total CHANGE (INEW) OR	ACDICIT	TIDAL MODTCACE	COMPANIZOE				
2209 RIVER ROAD LOUISVILLE, KY 40206 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY I. INITIAL FINANCING STATEMENT FILE # 1b. This FINANCING STATEMENT AMEND 1b. De filed flor record (or recorded) in the 1c. This FINANCING STATEMENT AMEND 1c. This FINANCING STA			COMPANTOR				
LOUISVILLE, KY 40206 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY I. INITIAL FINANCING STATEMENT FILE 9 TO be filled [for record] (or recorded) in the REAL ESTATE RECORDS. TERMINATION: Effectiveness of the Financing Statement Identified above is terminated with respect to security interest(e) of the Secured Party authorizing this Termination Statement is continued for the additional period provided by applicable law. ASSKINMENT (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. 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: Please refer to the detailed instructions Interest to be deleted in item 8e or 6b. CURRENT RECORD INFORMATION: 6b. INDIVIDUAL'S LAST NAME ALFORD CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE		•					
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY a. INITIAL FINANCING STATEMENT FILE # 10	2209 RIV	ER ROAD					
a. INITIAL FINANCING STATEMENT FILE # 1b. This FINANCING STATEMENT AMEND 1	LOUISVI	LLE, KY 40206					
a. INITIAL FINANCING STATEMENT FILE # 1b. This FINANCING STATEMENT AMEND 1		•					
TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional period provided by applicable law. 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. 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. 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: Please refer to the detailed instructions Debtor or Deb				THE ABOVE SPA	CE IS FO	R FILING OFFICE U	SE ONLY
TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is 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. 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. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor of the 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: Please refer to the detailed instructions DELETE name: Give record name ADD name: Complete item 7a or 7b, and also it in reserves to changing the name/dorase of a party.	I. INITIAL FINANCING STA						
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. ASSIGNMENT (full or partial): Give name of assignes in item 7s or 7b and address of assignes in item 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or o	TERMINATION: C				LLI RE/	AL ESTATE RECORDS.	•
Continued for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7s or 7b and address of assignee in item 7c; and also give name of assignor in item 9. 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: Please refer to the detailed instructions DELETE name: Give record name ADD name: Complete item 7a or 7b, and also it to be deleted in item 6a or 6b. CURRENT RECORD INFORMATION: Ga. ORGANIZATION'S NAME FIRST NAME MIDDLE NAME SUFF							
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: Please refer to the detailed instructions DELETE name: Give record name Increased to changing the name/address of a party. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFF ALFORD CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE	continued for the addi	tional period provided by applicable law.	denumed above with respect to security in	erest(s) of the Secured	Party author	orizing this Continuation	Statement is
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: Please refer to the detailed instructions DELETE name: Give record name Increased to changing the name/address of a party. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFF ALFORD CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE	ASSIGNMENT MILL	or partial). Ghe name of essignes in item	7e or 7h and address of assignes in them 7e	and also also name of		h 0	
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Please refer to the detailed instructions DELETE name: Give record name to be deleted in item 6a or 6b. CURRENT RECORD INFORMATION: Ga. ORGANIZATION'S NAME R 6b. INDIVIDUAL'S LAST NAME ALFORD GARY D. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME R OLICIAN ORGANIZATION'S NAME ALFORD CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME R U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE							
Interpreted to channing the nemerholdress of a party. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S LAST NAME ALFORD CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE				r record. Check only <u>or</u>	E of these	two boxes.	
CURRENT RECORD INFORMATION: One ORGANIZATION'S NAME	CHANGE name and/ora	address: Please refer to the detailed instruction	DELETE name: Give n	cord name	☐ ADD n	ame: Complete item 7a o	r?b, and also item 7d
R 8b. INDIVIDUAL'S LAST NAME ALFORD GARY D. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE			to be deleted in form 5s	or 66.	alsoc	omplete Items 7e-7g (If app	olicable).
ALFORD CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE							
ALFORD CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE							
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE	OD. INDIVIDUAL S LAST	NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE	ALFORD		GARY		D.		
U.S. BANK NATIONAL ASSOCIATION, AS CUSTODIAN/TRUSTEE						·	
The property of the second sec		···· ·					
INDUCE NAME SUFF	U.S. BANK	NATIONAL ASSOCIAT		/TRUSTEE	1		
	/B. INDIVIDUAL'S EAST	NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS CITY STATE POSTAL CODE COUR	MAII ING ADDRESS		CITY		 	I	
COLUMN TO THE POSITION OF THE		NI ANTE					COUNTRY
50 LIVINGSTON AVE. ST. PAUL MN 55107 US 1. SEEINSTRUCTIONS ADD'L INFO RE 76. TYPE OF ORGANIZATION 77. JURISDICTION OF ORGANIZATION 78. ORGANIZATIONAL ID #. 15 env				SANIZATION			USA
ORGANIZATION '		ORGANIZATION '	71. JORISDICTION OF OR	SANIZATION	/g. ORG/	ANIZATIONALID#, ITE	•
AMENDMENT (COLLATERAL CHANGE): check only one box.							

Real property in the County of Klamath, State of Oregon, described as follows:

All the real property situated in the County of Klamath, State of Oregon, and being a portion of Sections 21 and 28 of Township 40 South, Range 11 East of the Willamette Meridian, more particularly described as follows:

Parcel 1:

The SW 1/4 SW 1/4 of said Section 21 Township 40 South, Range 11 East of the Williamette Meridian.

Parcel 2:

That portion of the NW 1/4 NW 1/4 of said Section 28 described as beginning at a point in the Section line marking the boundary between Sections 28 and 29, from which the section corner common to Sections 20, 21, 28 and 29 bears North 664.3 feet distant, and running thence North 664.3 feet to said section corner; thence Easterly along the North line marking the boundary between said Sections 21 and 28, 1310.5 feet, more or less, to the Northeasterly corner of said NW 1/4 NW 1/4 of said Section 28; thence South 63°56' West 1456.6 feet, more or less to said point of beginning.

Tax Parcel Number: 103863