M06-03078

Klamath County, Oregon 02/17/2006 08:30:19 AM Pages 1 Fee: \$21.00

LICC FINANCING	STATEMENT	AMENDMENT
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UCC FINANCING STATEMENT AMENDMENT			
FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
A. NAME & PHONE OF CONTACT AT FILER [optional]	100		
Rowena A. Chase, PT (541) 883-6924 Ext. B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	108		
B. SEND ACKNOVVLEDGEMENT TO: (Name and Address)			
LIGDA (Carrier A constr			
USDA/Farm Service Agency	ļ		
2316 South 6th Street			
Suite C			
Klamath Falls, OR 97601			
		CE IS FOR FILING OFFICE US	
1a. INITIAL FINANCING STATEMENT FILE #	ed: 06/11/2001	This FINANCING STATEMEN to be filed [for record] (or recor	
Vol. M01, Page #27357 Orig. Date File	ed: 06/11/2001	REAL ESTATE RECORDS.	
 TERMINATION: Effectiveness of the Financing Statement identified above is te 	erminated with respect to security interest(s) of the	Secured Party authorizing this Term	nation Statement.
 CONTINUATION: Effectiveness of the Financing Statement identified above wi for the additional period provided by applicable law. 	ith respect to security interest(s) of the Secured F	arty authorizing this Continuation Stat	ement is continued
4. ASSIGNMENT: (full or partial): Give name of assignee in item 7a or 7b and add	dress 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		
Also check one of the following three boxes and provide appropriate information in item	6 and/or 7.		
CHANGE name and/or address: Give current record name in item 6a or 6b; also gi name (if name change) in item 7a or 7b and/or new address (if address change) in item 7	ive new DELETE name: Give record na 7c. to be deleted in item 6a or 6b.	me ADD name; Complete iten 7c; also complete items 7d-7g	
6. CURRENT RECORD INFORMATION:	TO BE GOING IT HOW OF OF OB.	10, 400 00110101010101010101010101010101010	, (п другодио).
6a. ORGANIZATION'S NAME			
Garcelons and Sons, A Partnership OR 65, INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	Isuffix
OR INDIVIDUALS LAST NAME	THO MAINE	INDUCE INNIE	COLLIX
7. CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
OR 75 INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
OR 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	WIDDLE IVANIE	301112
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
1829 Burgdorf Road	Bonanza	OR 97623	USA
7d. ADD'L. INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID#,	if any
DEBTOR A Partnership	Oregon		✓ NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateral deleted or added, or give entire restated collateral des	scription, or describe collateral assigned.		

9.NAME OF SECURED PARTY OF RECORD AUTHORIZING THIs collateral or adds the authorizing Debtor, or if this is a Termination authorized by			a debtor which adds
9a. ORGANIZATION'S NAME USDA/Farm Service Agency by: ROV			lase
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA			· · · · · · · · · · · · · · · · · · ·

404 FILING OFFICE COPY -- NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 8/02)

