2007-011596 Klamath County, Oregon

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UCC FINANCING	STATEMENT	AMENDMEN
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FOLLOW INSTITUTE	HONS (none and paci	Corutal Oce	
A. NAME & PHON	OF CONTACT AT FIL	.ER [optional]	3 .
Wendy	IVWIN	(209)	472-3912
B. SEND ACKNOV	/LEDGMENT TO: (Na	me and Address)	

	Rabo AgriF 10100 Trinity Park Stockton, C	wav. Suite 400)
Ln	17893	31-K	<u>ي</u>

LmT78931-KR	THE ABOVE		R FILING OFFICE US	المنجعة يستمر بمراجع ومعاملات
1a. INITIAL FINANCING STATEMENT FILE # File No. M03, Page 20611 filed 4/3/2003 with Klamath	County, OR	to b	FINANCING STATEME e filed [for record] (or rec AL ESTATE RECORDS.	
2. V TERMINATION: Effectiveness of the Financing Statement identified above is	terminated with respect to security interest(s) of	he Secured Par	ty authorizing this Termin	ation Statement.
3. CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.	ve with respect to security interest(s) of the Secu	ired Party autho	orizing this Continuation	Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a	address of assignee in item 7c; and also give nam	e of assignor in	item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Del	otor or Secured Party of record. Check on	y <u>one</u> of these t	wo boxes.	
Also check one of the following three boxes and provide appropriate information in it			S S	7 7h l -l
CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)	p give new DELETE name: Give record reprint to be deleted in item 6a or 6b.	ame AL ite	D name: Complete item m 7c; also complete item	7a or 7b, and also s 7d-7g (if applicable).
6. CURRENT RECORD INFORMATION: [6a. ORGANIZATION'S NAME]				
OR 66. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
Northcutt	Leslie	E.		
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 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. ORG	 ANIZATIONAL ID #, if ar	y None
8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral	al description, or describe collateral assign	ed.		

NAME OF SECURED PARTY OF RECORD AUTHOR adds collateral or adds the authorizing Debtor, or if this is a Terr	RIZING THIS AMENDMENT (name of assignor, if this is mination authorized by a Debtor, check here and enter	s an Assignment). If this is an Amendment auth name of DEBTOR authorizing this Amendme	norized by a Debtor which ent.
9a. ORGANIZATION'S NAME			
MONY LIFE INSURANCE COMPANY	F/K/A THE MUTUAL LIFE INSURA		
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA Loan No. 12743-Northcutt - sms			

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)



OLLOW INSTRUCTIONS (front and A. NAME & PHONE OF CONTAGT WONDY TOWN	「AT FILER [optional] 1 (209)ゼフラー	NT 3912		
10100 Trinity	AgriFinance Parkway, Suite 400 on, CA 95219			
	1 filed 4/3/2003 with Klamath		ACE IS FOR FILING OFFICE USE 1b. This FINANCING STATEMENT to be filed [for record] (or record) REAL ESTATE RECORDS. Secured Party authorizing this Termination	AMENDMENT is ded) in the
	ss of the Financing Statement identified abo	with respect to security interest(s) of the Secure		
CHANGE name and/or address: 0	boxes <u>and</u> provide appropriate information in Give current record name in item 6a or 6b; als or 7b and/or new address (if address change	o give new DELETE name: Give record name		or 7b, and also d-7g (if applicab
66. INDIVIDUAL'S LAST NAME Northcutt		FIRST NAME Leslie	MIDDLE NAME	SUFFIX
'. CHANGED (NEW) OR ADDED INF	FORMATION:	LUSITU	E.	
7a. ORGANIZATION'S NAME				
7b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
c. MAILING ADDRESS		CITY	STATE POSTAL CODE	COUNTRY
		7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any	
d. TAX ID #: SSN OR EIN ADD'L IN ORGANI DEBTOR	3	71. SURISDICTION OF ORGANIZATION	3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	□no
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