2008-010140

Klamath County, Oregon

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UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Phone (800) 331-3282 Fax (818) 662-4141 B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 11656 WASHINGTON MUT 14983757 **UCC Direct Services** P.O. Box 29071 OROR Glendale, CA 91209-9071 **FIXTURE** 1a. INITIAL FINANCING STATEMENT FILE # VOL M03PAGE 79522 10/27/03 CC OR Klamath Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. **TERMINATION:** CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the 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 7c; and also give name of assignor in item 9. Secured Party of record. Check only one of these two boxes 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Also check one of the following three boxes and provide appropriate information in items 6 and/or 7 DELETE name: Give record name CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c 6. CURRENT RECORD INFORMATION: 6a ORGANIZATION'S NAME MAX & MIKE, LLC OR 6b. INDIVIDUAL'S LAST NAME FIRST NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR SUFFIX MIDDLE NAME 7b. INDIVIDUAL'S LAST NAME FIRST NAME POSTAL CODE COUNTRY 7c. MAILING ADDRESS CITY STATE 7e, TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID#, if any 7d. SEE INSTRUCTION ADD'L INFO RE

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignment)	
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here	and enter name of DEBTOR authorizing this Amendment.
9a. ORGANIZATION'S NAME	
Washington Mutual Bank	

FIRST NAME

added, or give entire restated collateral description, or describe collateral

10. OPTIONAL FILER REFERENCE DATA

9b. INDIVIDUAL'S LAST NAME

OR

ORGANIZATION

DESTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box.

Describe collateral deleted or

see attachment

14983757 Debtor Name: MAX & MIKE, LLC 3023BBOR 706860811 3023-10249034

MIDDLE NAME

SUFFIX

NONE

	UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY				
	11, 1	NITIAL FINANCING STATEMENT FILE	# (same as item 1a on Amen	dment form)	
	VO	L M03PAGE 79522 10/27/03	CC OR Klamath		
12. NAME of PARTY AUTHORIZING THIS AMENDMENT (same as Item 9 on Amendment form)					
7		12a. ORGANIZATION'S NAME Washington Mutual Bank			
	OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX	
	13. l	•			

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Description: LOTS 13, 14, 15 AND THE W 1/2 OF 16 IN BLOCK 1, SIXTH STREET ADDITION TO THE CITY OF KLAMATH FALLS, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY CLERK OF KLAMATH COUNTY, OREGON. TAX ID # 530456

LOTS 13, 14, 15 AND THE W 1/2 OF 16 IN BLOCK 1, SIXTH STREET ADDITION TO THE CITY OF KLAMATH FALLS, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY CLERK OF KLAMATH COUNTY, OREGON. TAX ID # 530456