2011-005310

Klamath County, Oregon



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UCC FINANCING STATEMENT AMENDING FOLLOW INSTRUCTIONS (front and back) CAREFULLY		04/29/2011 10:33:13 AM	Fee: \$47.
A. NAME & PHONE OF CONTACT AT FILER [optional]			
1-800-648-8026			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
DIVERSIFIED FINANCIAL SERVICES, LL	.c		
14010 FNB PKWY, STE. 400			
OMAHA, NE 68154			
1	i		
		THE ABOVE SPACE IS FOR FILL	NG OFFICE USE ONLY
a. INITIAL FINANCING STATEMENT FILE #	,		ICING STATEMENT AMENDMENT IS
2008-014363 KLAMATH COUNTY, OR 10/21/2	8008		for record) (or recorded) in the ATE RECORDS.
2. / TERMINATION: Effectiveness of the Financing Statement identified at			
CONTINUATION: Effectiveness of the Financing Statement identifie			
continued for the additional period provided by applicable law.	a acora will rasposi to occurry		
4. 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.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects		of record. Check only one of these two box	es.
Also check one of the following three boxes and provide appropriate information			
CHANGE name and/or address: Give current record name in item 6a or 6 name (if name change) in item 7a or 7b and/or new address (if address of	Sb; also give new DELETE	E name: Give record name ADD name	e: Complete item 7a or 7b, and also lso complete items 7d-7g (if applicable).
CURRENT RECORD INFORMATION:	tungoj in kom tor		
6a. ORGANIZATION'S NAME			
HAMMERICH, INC		·	
66. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
OR - WYDWYDIA O LAGT NAME	Trings	MIDDLE NAME	SUFFIX
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
	0.77	STATE INCOME	AL CODE COUNTRY
c, MAILING ADDRESS	CITY	STATE POST	'AL CODE COUNTRY
THE PROPERTY AND DESCRIPTION OF DECAMIZATION	7f, JURISDICTION OF C	DECANIZATION TO ORGANIZAT	TONAL ID #, if any
rd. TAX ID #: S\$N OR EIN ADD'L INFO RE 7e, TYPE OF ORGANIZATIO OHGANIZATION	71, JOHISBIGHON OF C	INGANIZATION 79. ONGANIZAT	
DEBTOR			NONE
3. AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateraldeleted oradded, or give entirerestated co	ollateral description, or describe	collateral assigned.	
SEE ATTACHED ADDENDUM			
SEE ATTACHED ADDENDOM	·		
, NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS	S AMENDMENT (name of assig		
adds collateral or adds the authorizing Debtor, or if this is a Termination authorizing	orized by a Debtor, check here	and enter name of DEBTOR authorizing the	is Amendment.
9a. ORGANIZATION'S NAME			
DIVERSIFIED FINANCIAL SERVICES, LLC			
OR L	EIGGT NAME	MIDDLE NAME	SUBERIX

10. OPTIONAL FILER REFERENCE DATA

0078624-003 HAMMERICH, INC.

ŲC	C FINANCING STATEM	ENT AMENDME	ENT ADDENDUM		
FOL	LOW INSTRUCTIONS (front and back) CAREFULLY			
11.	INITIAL FINANCING STATEMENT FIL	E # (same as item 1a on Ame	ndment form)		
20	08-014363 KLAMATH CO	UNTY, OR 10/21/20	008		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)					
	12a, ORGANIZATION'S NAME				
00	DIVERSIFIED FINANCIAL SERVICES, LLC				
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX		
			İ		
13.	use this space for additional information	on	<u> </u>		

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

DEBTORS:HAMMERICH, INC.

RECORD OWNERS: HAMMERICH, INC.

LEGAL DESC.: SEE EXHIBIT "A", KLAMATH COUNTY, OR

EXHIBIT "A"

SW ¼ NE ¼ SECTION 9 TOWNSHIP 39 RANGE 11 TAX LOT 1600 NE ¼ NW ¼, NW ¼ NE ¼, W ½ NE ¼ NE ¼ SECTION 8 TOWNSHIP 39 RANGE 11 TAX LOTS 300 & 400 SE ¼ SW ¼ SECTION 5 TOWNSHIP 39 RANGE 11 TAX LOT 700 ALL IN KLAMATH COUNTY, OR