2012-000389 Klamath County, Oregon



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|---|-----------------------------------|---|--|
| JCC FINANCING STATEMENT AMENDME | NT | 01/18/2012 09:01:05 AM | Fee: \$42.0 |
| OLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] | | · | |
| 1-800-648-8026 Kelli Flaspohler | | | |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address) | | | |
| <u> </u> | | | |
| DIVERSIFIED FINANCIAL SERVICES, LLC | · " | | |
| 14010 FNB PKWY, STE. 400 | | | |
| OMAHA, NE 68154 | Į. | | |
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| 1 | | | |
| L. <u></u> | | THE ABOVE SPACE IS FOR FILING O | FFICE USE ONLY |
| 1a, INITIAL FINANCING STATEMENT FILE # | | | STATEMENT AMENDMENT is cord] (or recorded) in the |
| 2006-023511 KLAMATH COUNTY, OR 11/24/2 | | REAL ESTATE R | ECORDS. |
| 2. TERMINATION: Effectiveness of the Financing Statement identified about | | | |
| CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law. | above with respect to security | interest(s) of the Secured Party authorizing this Co | entinuation Statement is |
| 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. | · |
| | | y of record. Check only one of these two boxes. | |
| Also check one of the following three boxes and provide appropriate information | J | , • · · · · · · · · · · · · · · · · · · | |
| CHANGE name and/or address: Give current record name in item 6a or 6b name (if name change) in item 7a or 7b and/or new address (if address change) | stalso give new DELET | E name: Give record name ADD name: Cor eleted in item 6a or 6b. item 7c; also cor | mplete item 7a or 7b, and also mplete items 7d-7g (if applicable). |
| 6. CURRENT RECORD INFORMATION: | | | |
| 6a. ORGANIZATION'S NAME | | | |
| OR SE MICHAELS LAST NAME | I | TMIDDLE NAME | SUFFIX |
| OU. HADIVIDONE S ENST HAME | FIRST NAME JOHN | WIDDLE WANT | 351114 |
| NORTHCUTT | JOHN | | |
| 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME | | | |
| 12. ONO WILL THE | | | |
| OR 7b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX |
| | | | |
| 7c. MAILING ADDRESS | СПҮ | STATE POSTAL CO | |
| 6521 E. LANGELL VALLEY RD | BONANZA | OR 97623 | USA |
| 7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e, TYPE OF ORGANIZATION ORGANIZATION DEBTOR | Tf. JURISDICTION OF | ORGANIZATION 7g. ORGANIZATIONA | L ID#, if any |
| 8. AMENDMENT (COLLATERAL CHANGE): check only one box. | | | |
| Describe collateral deleted or added, or give entire restated col | llateral description, or describe | e collateral assigned. | |
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| | | | |
| 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS | AMENDMENT (name of ass | ignor, if this is an Assignment). If this is an Amendme | ent authorized by a Debtor which |
| adds collateral or adds the authorizing Debtor, or if this is a Termination autho | rized by a Debtor, check here | and enter name of DEBTOR authorizing this Am | endment. |
| 9a. ORGANIZATION'S NAME | | | |
| DIVERSIFIED FINANCIAL SERVICES, LLC. | T-1-12 | TAIRDI E NAME | OHEELV |
| 96. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX |
| | | | |
| 10, OPTIONAL FILER REFERENCE DATA | | | |
| 009-0134794-001 NORTHCUTT TERM | | | |

| UC | C FINANCING STATE | MENT AMENDME | NT ADDENDUM | | |
|-----|---|---------------------------------|---------------------------------------|--|--|
| FOL | LOW INSTRUCTIONS (front and ba | ack) CAREFULLY | | | |
| 11. | INITIAL FINANCING STATEMENT | FILE # (same as item 1a on Amer | idment form) | | |
| 20 | 06-023511 KLAMATH C | COUNTY, OR 11/24/2 | 006 | | |
| 12. | NAME OF PARTY AUTHORIZING 12a. ORGANIZATION'S NAME | THIS AMENDMENT (same as i | tem 9 on Amendment form) | | |
| OR | DIVERSIFIED FINANCIAL SERVICES, LLC | | | | |
| OK | 12b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME, SUFFIX | | |
| | | | | | |
| 13, | Use this space for additional inform | ation | · · · · · · · · · · · · · · · · · · · | | |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

DEBTORS: NORTHCUTT, JOHN

RECORD OWNERS: JOHN NORTHCUTT

LEGAL DESC.: SECTION 20 T-39S R-12E TAX LOT 600 KLAMATH COUNTY, OR