		2013-003523 Klamath County, Oregon				
JCC FINANCING STATEMENT OLLOW INSTRUCTIONS (front and back) CA	, . NT	00133719201300035230020021 04/03/2013 09:41:38 AM Fee: \$42.0				
A. NAME & PHONE OF CONTACT AT FILER [optional] Phone (800) 331	-3282 Fax (818	3) 662-4141				
B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Ad	<u> </u>					
CT Lien Solutions	372765	08				
P.O. Box 29071	0000					
Glendale, CA 91209-9071	OROR					
1	FIXTUF	[₹]				
			THE ABO		IS FOR FILING OFFICE U	
. INITIAL FINANCING STATEMENT FILE # 2010-006401 05/27/10 CC OR Klan	nath			₩ to!	is FINANCING STATEME be filed [for record] (or rec AL ESTATE RECORDS	NT AMENDMENT is orded) in the
TERMINATION: Effectiveness of the Financing	Statement identified abov	e is terminated with respec	t to security interest(s)	of the Secure	d Party authorizing this Te	mination Statement.
CONTINUATION: Effectiveness of the Financing continued for the additional period provided by applications.		e with respect to the secur	ty interest(s) of the Sec	ured Party au	thorizing this Continuation	Statement is
AMENDMENT (PARTY INFORMATION): This Ame Also check one of the following three boxes and pr CHANGE name and/or address: Give current record in name (if name change) in item 7a or 7b and/or new a CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	ovide appropriate informame in item 6a or 6b; also	mation in items 6 and/o	rty of record. Check only r 7. TE name: Give record r deleted in item 6a or 6b	name [e two boxes. ADD name: Complete ite item 7c; also complete ite	
6b, INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
CHANGED (NEW) OR ADDED INFORMATION:						
7a. ORGANIZATION'S NAME						
7b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX
MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
SEE INSTRUCTION ADD'L INFO RE ORGANIZATION DEBTOR	E OF ORGANIZATION	7f. JURISDICTION OF	DRGANIZATION	7g. ORG	ANIZATIONAL ID #, if any	NONE
AMENDMENT (COLLATERAL CHANGE): check of Describe collateral deleted or X added, or give Zimmatic Gen II Center Pivot: 1-6 Tower	entire restated collat	eral description, or desc	ibe collateral assig	gned.		

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which 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 Klamath Pump Center Inc OR MIDDLE NAME 9b. INDIVIDUAL'S LAST NAME SUFFIX 10. OPTIONAL FILER REFERENCE DATA

37276508 Debtor Name: Yacoobian Ranch LLC 151206870 633

UC	C FINAN	CING STA	TEMENT	AMENDMEN	IT ADDENDUM
FO	LLOW INST	RUCTIONS (front and ba	ack) CAREFULLY	
11.	INITIAL FINAN	ICING STATE	MENT FILE #	(same as item 1a on Amer	idment form)
201	10-006401	05/27/10	CC OR F	Clamath	
12. 1	NAME of PARTY	AUTHORIZING	THIS AMEND	MENT (same as item 9 on Am	endment form)
		ATION'S NAME np Center Inc			
,OR	12b. INDIVIDU	AL'S LAST NAM	E	FIRST NAME	MIDDLE NAME, SUFFIX
42	Lice this enge	o for addition	al informatio		

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Recorded Owner: Yacoobian Ranch LLC Description: See attached Exhibit "A"