UCC FINANCING STATEMENT AMENDMENT

2013-007283 Klamath County, Oregon

004303450040007000000000	

001383152	2013000728	830020025	5	

FOLLOW INSTRUCTIONS (front and back) CAREFULLY		06/26/2013 09):14:52 <i> </i>	AM	Fee: \$42.00
A. NAME & PHONE OF CONTACT AT FILER [optional] Phone: (800) 331-3282 Fax: (818) 662-4141		·			
	PRGAN CHASE - COP				
CT Lien Solutions	38683856				
P.O. Box 29071	00000000				
Glendale, CA 91209-9071	OROR				
	FIXTURE				
1					
File with: Klamath, OR		THE ABOVE SPA	CE IS FO	R FILING OFFICE	USE ONLY
1a, INITIAL FINANCING STATEMENT FILE # VOL M03 PG78085-87 10/21/2003 CC OR Kla	nmath		to be	NANCING STATEMENT A filed [for record] (or records ESTATE RECORDS.	
TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with respect to security	interest(s) of the Secured Party auth	orizing this T	ermination Statement.	
CONTINUATION: Effectiveness of the Financing Statement identified abord continued for the additional period provided by applicable law.	ve with respect to security interest(s)	of the Secured Party authorizing this	Continuation	Statement is	
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and	d address of assignee in item 7c; and	also give name of assignor in Item 9.			
	ror Secured Party of record. C				
Also check one of the following three boxes and provide appropriate information					
CHANGE name and/or address: Please refer to the detailed instructions lin regards to changing the name/address of a party.	DELETE name:	Give record name item 6a or 6b.	ADD also d	name: Complete item 7a or complete items 7e-7g (if ap	7b and also item 7c; blicable).
6. CURRENT RECORD INFORMATION:					
6a. ORGANIZATION'S NAME					
Washington Mutual Bank					
6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:			İ		
7a, ORGANIZATION'S NAME					
JPMORGAN CHASE BANK, N.A.					
7b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
3929 W JOHN CARPENTER FRWY	IRVING		lτx	75063	USA
7d. SEE INSTRUCTIONS ADD'L INFO RE 78. TYPE OF ORGANIA		OF ORGANIZATION		NIZATIONAL ID #, if any	
ORGANIZATION DEBTOR					NONE
AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box. Describe collateral deleted or added, or give entire restated co	llateral description, or describe collat	eral assigned.			

			gnor, if this is an Assignment). If this is an Amendment aut r, check here and enter name of DEBTOR authorizing		
	9a. ORGANIZATION'S NAME Washington Mutual Banl	<			
OR	9b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
10.0	OPTIONAL FILER REFERENCE DATA	Debtor Name: ROBNETT, STEPH	IEN R.		
386	683856	706868561		0	



	ANCING STATEM JCTIONS (front and back) CARE	ENT AMENDMENT A	DDENDUM	
11. INITIAL FINA VOL M03	NCING STATEMENT FILE # (se PG78085-87 10/2	me as item 1a on Amendment form) 1/2003 CC OR Klamath		
12. NAME OF PA	RTY AUTHORIZING THIS AMEN	IDMENT (same as Item 9 on Amendmer	nt form)	
	nization's NAME ngton Mutual Bank			
OR 12b. INDIVI	DUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX	
13.Use this space	for additional information			
•				
				THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Real Estate Description follows:
Recorded Owner:
Owner Address:,
Description: FOR PROPERTY COMMONLY KNOWN AS:
7400 KINGS WAY
KLAMATH FALLS, OR 97603