

2014-010116

Klamath County, Oregon



00159392201400101160040047

09/30/2014 12:11:31 PM

Fee: \$62.00

RECORDING COVER SHEET (Please Print or Type) this cover sheet was prepared by the person presenting the instrument for recording. The information on this sheet is a reflection of the attached instrument and was added for the purpose of meeting first page recording requirements in the State of Oregon, ORS 205.234, and does NOT affect the instrument.

AFTER RECORDING RETURN TO:

THIS SPACE RESERVED FOR USE BY
THE COUNTY RECORDING OFFICE

PACIFIC CONTINENTAL BANK
ATTN: LOAN PROCESSING DEPT
PO BOX 10727
EUGENE OR 97440

SEND TAX STATEMENTS TO:

TITLE(S) OF THE TRANSACTION(S) ORS 205.234(a)
FIXTURE CONTINUATION

DIRECT PARTY(S) -- (i.e., DEEDS: Seller/Grantor; MORTGAGES: Borrower/Grantor; LIENS: Creditor/Plaintiff)
ORS 205.125(1) (b) and 205.160
Advantage Dental Clinics, LLC

INDIRECT PARTY(S) -- (i.e., DEEDS: Buyer/Grantee; MORTGAGES: Beneficiary/Lender; LIENS: Debtor/Defendant)
ORS 205.125(1) (a) and 205.160

PACIFIC CONTINENTAL BANK

TRUE AND ACTUAL CONSIDERATION-- (Amount in dollars or other) ORS 93.030(5)
\$ _____

JUDGMENT AMOUNT-- (obligation imposed by the order or warrant) ORS 205.125(1) (c)
\$ _____

8) If this instrument is being Re-Recorded, complete the following statement, in accordance with ORS 205.244:

"RERECORDED AT THE REQUEST OF PACIFIC CONTINENTAL BANK
TO CORRECT DEBTOR NAMES ON FIXTURE CONTINUATION. SEE ATTACHED EXHIBIT "A" FOR CORRECT
DEBTOR NAMES.

PREVIOUSLY RECORDED IN BOOK/PAGE/FEE NUMBER 2014-005099

2014-005099
Klamath County, Oregon

05/12/2014 02:27:09 PM

Fee: \$47.00

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 862-4141	
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 17888 - PACIFIC	
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	43226374 OROR FIXTURE

File with: Klamath, OR

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
2009-010422 7/31/2009 CC OR Klamath

1b. ☒ This FINANCING STATEMENT AMENDMENT is to be filed [for record]
(or recorded) in the REAL ESTATE RECORDS
File: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. ☐ TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☐ ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 8
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☒ CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ PARTY INFORMATION CHANGE:

Check one of these two boxes:

AND Check one of these three boxes to:

This Change affects ☐ Debtor or ☐ Secured Party of record

CHANGE name and/or address: Complete item 8a or 8b, and item 7a or 7b and item 7c

ADD name: Complete item 7a or 7b, and item 7c

DELETE name: Give record name to be deleted in item 8a or 8b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (8a or 8b)

8a. ORGANIZATION'S NAME Advantage Consolidated, LLC				
OR	8b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S) INITIAL(S)	SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME			
OR	7b. INDIVIDUAL'S SURNAME		
INDIVIDUAL'S FIRST PERSONAL NAME			
INDIVIDUAL'S ADDITIONAL NAME(S) INITIAL(S)			
SUFFIX			

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
---------------------	------	-------	-------------	---------

8. ☐ COLLATERAL CHANGE: Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral

Indicate collateral:

Debtor Name and Address:

Advantage Consolidated, LLC - 442 S.W. Umatilla, Suite 200, Redmond, OR 97756
Advantage Community Holding Company, LLC - 442 S.W. Umatilla, Suite 200, Redmond, OR 97756
Advantage Support Services, LLC - 442 S.W. Umatilla, Suite 200, Redmond, OR 97756
Advantage Property Management, LLC - 442 S.W. Umatilla, Suite 200, Redmond, OR 97756
Advantage Professional Management, LLC - 442 S.W. Umatilla, Suite 200, Redmond, OR 97756
Advantage Equipment Leasing, LLC - 442 S.W. Umatilla, Suite 200, Redmond, OR 97756
Advantage Clinic Properties, LLC - 442 S.W. Umatilla, Suite 200, Redmond, OR 97756

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)

If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME Pacific Continental Bank				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S) INITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: Advantage Consolidated, LLC

43226374

805 - Eugene -national healthcare loans

18558 & 18582

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form
2009-010422 7/31/2009 CC OR Klamath

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

12a. ORGANIZATION'S NAME	Pacific Continental Bank		
OR	12b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S) INITIAL(S)
			SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see instructions if name does not fit

13a. ORGANIZATION'S NAME	Advantage Consolidated, LLC		
OR	13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S) INITIAL(S)
			SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

Advantage Dental Group, LLC - 442 S.W. Umatilla, Suite 200, Redmond, OR 97756

Secured Party Name and Address:

Pacific Continental Bank - P.O. Box 10727, Eugene, OR 97440

15. This FINANCING STATEMENT AMENDMENT:

☐ covers timber to be cut ☐ covers as-extracted collateral ☒ is filed as a fixture filing

16. Name and address of a RECORD OWNER of real estate described in item 17
(If Debtor does not have a record interest):

17. Description of real estate:

Lots 13, 14, 15 and the West 1/2 of Lot 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.

18. MISCELLANEOUS: 43226374-OR-36 17888 - PACIFIC CONTINENTAL Pacific Continental Bank File with: Klamath, OR 805 - Eugene - national healthcare loans 18558 & 18582

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT ADDENDUM (Form UCC3Ad) (Rev. 04/20/11)

Prepared by CT Lien Solutions, P.O. Box 29071, Glendale, CA 91209-8071 Tel (800) 331-3282

STATE OF OREGON)
County of KLAMATH)

I CERTIFY that this is a true and correct copy of a document in the possession of the Klamath County Clerk.

Dated: 6-9-14
LINDA SMITH, Klamath County Clerk

By: Susan Costie, Deputy

EXHIBIT "A"

1. Advantage Dental Clinics, LLC
2. Advantage Consolidated, LLC
3. Advantage Community Holding Company, LLC
4. Advantage Support Services, LLC
5. Advantage Property Management, LLC
6. Advantage Professional Management, LLC
7. Advantage Equipment Leasing, LLC
8. Advantage Clinic Properties, LLC
9. Advantage Dental Group, LLC

DEBTOR #1 WAS INADVERTENTLY OMITTED FROM THE ORIGINAL FIXTURE CONTINUATION FILING
#2014-005099