2015-000119

Klamath County, Oregon

01/06/2015 10:52:40 AM

				Fee: \$47.00		
UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS			_			
A. NAME & PHONE OF CONTACT AT FILER (optional)		1				
B. E-MAIL CONTACT AT FILER (optional)		-				
O DEND ACKNOWN FROMENT TO AN						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	_					
Tracie Solarte c/o Moore & Van Allen PLLC						
100 N. Tryon Street Suite 4700						
Charlotte, NC 28202-4003	1					
1a. INITIAL FINANCING STATEMENT FILE NUMBER		THE ABOVE SPAC 1b. This FINANCING STATEME				
2011-014092 on 12/22/11		Filer: attach Amendment Adder	STATE I ndum (For	RECORDS m UCC3Ad) <u>and</u> provide	Debtor's	name in item 13
 TERMINATION: Effectiveness of the Financing Statement identified above is Statement 	s terminated v	vith respect to the security interest(s) of Sec	cured Party authorizin	g this T	ermination
ASSIGNMENT (full or partial): Provide name of Assignee in Item 7a or 7b, a For partial assignment, complete items 7 and 9 and also indicate affected colla	and address o	f Assignee in item 7c <u>and</u> name of . 3	Assignor	in item 9		
CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.	e with respect	to the security interest(s) of Secur	ed Party	authorizing this Cont	inuation	Statement is
5. PARTY INFORMATION CHANGE:						
Check <u>one</u> of these two boxes: AND Check one of these two boxes: CHANGE	name and/or a	oddress: CompleteADD name	: Comple	te itemOELETE n	ame: G	ve record name
This Change affects Debtor or Secured Party of record item 6a or 6. CURRENT RECORD INFORMATION: Complete for Party Information Change		7a or7b <u>and</u> ifem 7c7a or7b, <u>a</u> one name (6a or6b)	nd item 7	to be delet	ed in ite	m 6a or 6b
6a ORGANIZATION'S NAME		# W 1				
OR 6b. INDIVIDUAL'S SURNAME FI	RST PERSON	IAL NAME	OITIGGA	NAL NAME(S)/INITIAL	(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information C	Ohanna provide	and any area and the second full and	do	-		Ochtodo
7a. ÖRGANIZATION'S NAME	Outride - blosine	only one name (18 or 10) (use exact, lumination	e, do not u:	at, modify, or abbreviate an	y pait of it	ie Debioi s name)
OR 7b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
7c. MAILING ADDRESS	ſΪŶ	[:	STATE	POSTAL CODE		COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD co	illateral	DELETE collateral RE	STATE C	overed collateral		SIGN collateral
Indicate collateral:	, ilateral		OIAILU	overed Constens	L] A3	SIGN CONSTRAIN
 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMEI If this is an Amendment authorized by a DEBTOR, check here and provide name. 			me of Ass	signor, if this is an Ass	grment)
98. ORGANIZATION'S NAME BANK OF AMERICA, N.A., AS COLLATERAL AGEN	JT					
OR	RST PERSON	AL NAME /	ADDITIO	NAL NAME(S)/INITIAL	(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:						
	MATH C	COUNTY, OREGON				

11. 2	INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on A $011\text{-}014092$ on $12/22/11$	mendment form				
	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 of	on Amendment fo	m			
	12a. ORGANIZATION'S NAME BANK OF AMERICA, N.A., AS COLLATED	RAL AGE	TNT			
	Did to Third to the time to th	TOIL MOI	2141			
OR	12b. INDIVIDUAL'S SURNAME					
			···			
	FIRST PERSONAL NAME					
	ADDITIONAL NAME(S)/INITIAL(S)	s	UFFIX			
					SPACE IS FOR FILING OFFICE	
13.	Name of DEBTOR on related financing statement (Name of a current Deb one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbo	tor of record requeviate any part or	iired for indexing pur f the Debtor's name)	poses only in so ; see Instruction	me filing offices - see Instruction ite. s if name does not fit	n 13): Provide or
	13a. ORGANIZATION'S NAME		s			
OR	JELD-WEN, inc. 13b. INDIVIDUAL'S SURNAME	FIRST PERSO	NIAL NIAME		ADDITIONAL MARKETOVANITIALTON	learny
	13b. INDIVIDUAL 5 SURIYAME	FIRST PERSO	NAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	ADDITIONAL SPACE FOR ITEM 8 (Collateral):					
	This FINANCING STATEMENT AMENDMENT;	is a flixture filling	17. Description of re	eal estate:		

18. MISCELLANEOUS: