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2015-000733 Klamath County, Oregon



UCC FINANCING STATEMENT AMENDMENT

01/27/2015 09:26:32 AM **FOLLOW INSTRUCTIONS** Fee: \$42.00 A. NAME & PHONE OF CONTACT AT FILER (optional) Krista DeMartini, (707) 445-8871 B. E-MAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) American AgCredit, FLCA P.O. Box 398 Fields Landing, California 95537 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] 1a, INITIAL FINANCING STATEMENT FILE NUMBER (or recorded) in the REAL ESTATE RECORDS Volume M02, Page 51443 Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement 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 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8 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. X PARTY INFORMATION CHANGE: AND Check one of these three boxes to Check one of these two boxes: CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c ADD name: Complete item 7a or 7b, <u>and</u> item 7c DELETE name: Give record name to be deleted in item 6a or 6b This Change affects X Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAME Collins Timber Company, LLC FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 6b. INDIVIDUAL'S SURNAME 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 Collins Timber Company LLC 75. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME SUFFIX INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) STATE POSTAL CODE COUNTRY CITY 7c. MAILING ADDRESS USA OR 97070 29100 SW Town Center Loop W, Suite 300 Wilsonville ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: 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 American AgCredit, FLCA OR SUFFIX ADDITIONAL NAME(S)/INITIAL(S) 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME 10. OPTIONAL FILER REFERENCE DATA: January 20, 2015 Collins Timber Company - Klamath County, OR