	ENDMENT		2015-0051 Klamath County, 05/19/2015 08:39:51 A Fee: \$47.00	Oregon
FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-	858-5294	1		
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Addres	s)			
99843664 - 308510				
Corporation Service Company 801 Adlai Stevenson Drive				
Springfield, IL 62703 I	Filed In: Oregon (Klamath)			
	(Kiailiaui)	THE ABOVE SPACE	IS FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2014-010283 10/03/2014		(or recorded) in the REAL E	NT AMENDMENT is to be filed [for STATE RECORDS dum (Form UCC3Ad) <u>and</u> provide Debto	-
2. Z TERMINATION: Effectiveness of the Financing Statem Statement	ent identified above is terminated v		· · · · ·	
For partial assignment, complete items 7 and 9 and also CONTINUATION: Effectiveness of the Financing State continued for the additional period provided by applicable	ement identified above with respect		ed Party authorizing this Continuation	on Statement i
5. PARTY INFORMATION CHANGE: Check one of these two boxes:	AND Check one of these three bo	oxes to:		
This Change affects Debtor or Secured Party of record	CHANGE name and/or a	address: Complete ADD name:	Complete item DELETE name: d item 7c to be deleted in i	
· · · · ·	u lafamating Change annuide age			tem ba or bb
<ol><li>CURRENT RECORD INFORMATION: Complete for Part</li></ol>		one name (6a or 6b)		tem ba or bb
6. CURRENT RECORD INFORMATION: Complete for Part 6a. ORGANIZATION'S NAMEIncident Catering Se		one name (ba or bb)		
6a. ORGANIZATION'S NAMEIncident Catering Se			DDITIONAL NAME(S)/INITIAL(S)	SUFFIX
6a. ORGANIZATION'S NAMEIncident Catering Se	FIRST PERSON	IAL NAME	.,, .,,	SUFFIX
6a. ORGANIZATION'S NAMEIncident Catering Se 6b. INDIVIDUAL'S SURNAME 7. CHANGED OR ADDED INFORMATION: Complete for Assig	FIRST PERSON	IAL NAME	.,, .,,	SUFFIX
6a. ORGANIZATION'S NAMEIncident Catering Se 6b. INDIVIDUAL'S SURNAME 7. CHANGED OR ADDED INFORMATION: Complete for Assig 7a. ORGANIZATION'S NAME	FIRST PERSON	IAL NAME	.,, .,,	SUFFIX
6a. ORGANIZATION'S NAMEIncident Catering Se 6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assig 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	.,, .,,	SUFFIX
6a. ORGANIZATION'S NAMEIncident Catering Set         6b. INDIVIDUAL'S SURNAME         7a. ORGANIZATION'S NAME         7b. INDIVIDUAL'S SURNAME         INDIVIDUAL'S FIRST PERSONAL NAME	FIRST PERSON	IAL NAME	.,, .,,	SUFFIX f the Debtor's name

ABV Legal: NE QTR NE QTR SEC 12, TWN 39 S, R 8 E, W.M.

The land and improvements together with all fixtures now or hereafter owned by Debtor and attached or affixed to the land or improvements. The real property located at: 2717 Orindale Road, Klamath Falls, OR 98601

## Legal Description: See Exhibit "A" attached hereto and incorporated herein for full legal description.

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only <u>one</u> 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 Columbia State Bank

OR							
	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
10. OPTIONAL FILER REFERENCE DATA: Debtor: Incident Catering Services, LLC-:6206/1406003607							

## **EXHIBIT A**

## **LEGAL DESCRIPTION**

A parcel of land lying in the NE ¼ NE ¼ Section 12, Township 39 South, Range 8 East of the Willamette Meridian, Klamath County, Oregon, and being more particularly described as follows: Beginning at a point at the Southwest corner of said NE ¼ NE ¼; thence East a distance of 30 feet; thence North along the Easterly right of way of a 60 foot road a distance of 660 feet to the true point of beginning; thence continuing North along said Easterly right of way a distance of 490 feet; thence East 234 feet; thence South 490 feet; thence West 234 feet to the true point of beginning.