## 2015-012284 Klamath County, Oregon

							i.		
				nn.				 	

	AMENDACIT				11/10/2015 0	9:37:23 A	М	Fee: \$42.00
	C FINANCING STATEMENT AMENDMENT LOW INSTRUCTIONS	•		-				
A. N	AME & PHONE OF CONTACT AT FILER (optional)		1					
	ogen Taylor 503-245-8800							
	MAIL CONTACT AT FILER (optional) ylor@obsidianrenewables.com							
	END ACKNOWLEDGMENT TO: (Name and Address)		ł					
O. 3	CONTROL OF THE PROPERTY OF THE	_						
	Obsidian Finance Group, LLC							
	5 Centerpointe Drive Ste 590							
	Lake Oswego, OR 97035							
		1						
					THE ABOVE CDA	CE 16 EOD	FILING OFFICE USE	ANI V
	INITIAL FINANCING STATEMENT FILE NUMBER	1	b.		s FINANCING STATE	MENT AMEN	OMENT is to be filed (for re	
	11-011835	ŀ		in Fil	the REAL ESTATE RE er: <u>attach</u> Amendment A	CORDS ddendum (Fom	uCC3Ad) <u>and</u> provide Debi	or's name in item 13
2.	TERMINATION: Effectiveness of the Financing Statement identified above is	terminated v	vith re	espect to t	he security interest(s)	of Secured Pa	rty authorizing this Termin	ation Statement.
3.	ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and						-	
	For partial assignment, complete items 7 and 9 and also indicate affected collater	ral in item 8						
4.	CONTINUATION: Effectiveness of the Financing Statement identified above we the additional period provided by applicable law	with respect t	to the	security is	nterest(s) of Secured F	arty authonzi	ng this Continuation Stater	nent is continued for
5.	PARTY INFORMATION CHANGE:							
		name and/or	addr	ess: Comp		e: Complete		e: Give record name
6.	This Change affects					and item 7c	to be deleted i	n item 6a or 6b
υ.	6a. ORGANIZATION'S NAME	provide ora	, 57.15	THE THE				
	Knoll Ranch LLC							
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERS	ONA	L NAME		ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
7.	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information  7a. ORGANIZATION'S NAME	Change - pro	vide o	nly <u>one</u> nam	e (7a or 7b) (use exact, full	name; do not or	nit, modify, or abbreviate any pe	rt of the Debtor's name)
OR	7b. INDIVIDUAL'S SURNAME							
	INDIVIDUAL'S FIRST PERSONAL NAME							
	HISTORIA FINATI ENGGIVE NAME							
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)							
7c.	MAILING ADDRESS (	CITY				STATE	POSTAL CODE	COUNTRY
76.	MAILING ADDRESS	C111				GIAIL	1001720002	
_			F					
8.	COLLATERAL CHANGE: Also check one of these four boxes: ADI Indicate collateral:	D collateral	L	DELE	TE collateral	RESTATE CO	vered collateral	ASSIGN collateral
	indicate constens.							
						•		
9.	NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provi If this is an Amendment authorized by a DEBTOR, check here and provide nar				) (name of Assignor, it	this is an Ass	ignment)	
	9a. ORGANIZATION'S NAME	THE OF BOUTON	Zirig	DEBTOR				
	Obsidian Finance Group, LLC							
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERS	ONA	LNAME		ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
		- 1111				1		
10.	OPTIONAL FILER REFERENCE DATA:							