2016-000830

Klamath County, Oregon

01/27/2016 12:30:04 PM

Fee: \$47.00

UCC FINANCING STATEMENT AMENDMEN FOLLOW INSTRUCTIONS	IT					
A. NAME & PHONE OF CONTACT AT FILER (optional)		1				
Vanessa A. Orta 405-236-0003						
B. E-MAIL CONTACT AT FILER (optional)				46.		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
Anderson, McCoy & Orta PC	\neg			_ 7		
100 North Broadway, Suite 2600			- 4	A 7	k.	
Oklahoma City, OK 73102			#		٩.	
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L		THE ABOVE SPAC	E IS FO	R FILING OFFICE	USE ON	LY
1a. INITIAL FINANCING STATEMENT FILE NUMBER	. [b. This FINANCING STATEM	ENT AME	NDMENT is to be file		·
2015-012047 filed 11/3/15		(or recorded) in the REAL E Filer: attach Amendment Adde			e Debtor's r	name in item 13
2. TERMINATION: Effectiveness of the Financing Statement identified abo Statement	ve is terminated w	rith respect to the security interest	(s) of Sec	ured Party authorizir	ng this Te	rmination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7 For partial assignment, complete items 7 and 9 and also indicate affected			Assignor	in item 9		
CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law	bove with respect	to the security interest(s) of Secur	red Party	authorizing this Con	tinuation S	Statement is
5. PARTY INFORMATION CHANGE:		. 7				
	e of these three bo		. Camala	to item DELETE	Ci-	re record name
This Change affects Debtor or Secured Party of record item	NGE name and/or a 6a or 6b; <u>and</u> item 7	ddress: Complete 7a or 7b <u>and</u> item 7c	and item 7	to be dele	name: Giv eted in item	
6. CURRENT RECORD INFORMATION: Complete for Party Information Char	nge - provide only	one name (6a or 6b)				
6a. ORGANIZATION'S NAME	# ·			-		
OR 66 INDIVIDUAL'S SURNAME	TFIRST PERSON		ADDITIO	IA LALANT (O) (IAUTIA)	L (C)	OUEEIX
BD INDIVIDUALS SURIVAINE	FIRST PERSON	IAL NAME	ADDITIO	NAL NAME(S)/INITIA	L(3)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information. 7a. ORGANIZATION'S NAME	ation Change - provide	only <u>one</u> name (7a or 7b) (use exact, full nam	ne; do not on	nit, modify, or abbreviate as	ny part of the	Debtor's name)
WILMINGTON TRUST, NATIONAL ASSOCIATION	N, AS TRU	STEE*				
OR 75. INDIVIDUAL'S SURNAME	_	-	-			
		- N /	- 1	þ.		
INDIVIDUAL'S FIRST PERSONAL NAME		-				
INDIVIDUAL'S ADDITIONAL NAME (S)/INITIAL(S)			•			SUFFIX
	l.					
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE		COUNTRY
1100 North Market Street	Wilmingto	n	DE	19890		USA
8. COLLATERAL CHANGE: Also check one of these four boxes:	DD collateral	DELETE collateral RE	ESTATE c	overed collateral	☐ ASS	SIGN collateral
Indicate collateral:						
* FOR THE REGISTERED HOLDERS OF WELLS FA	ARGO COM	IMERCIAL MORTGAG	SE TRI	JST 2015-NX	(S4,	
COMMERCIAL MORTGAGE PASS-THROUGH CER	RTIFICATES	S, SERIES 2015-NXS4	Ļ			
 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A If this is an Amendment authorized by a DEBTOR, check here ☐ and provide 	AMENDMENT: F name of authorizing		ame of As	signor, if this is an As	signment)	
9a. ORGANIZATION'S NAME	manie or authorizin	ig Debioi				
NATIXIS REAL ESTATE CAPITAL LLC						
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	NAL NAME	ADDITIO	NAL NAME(S)/INITIA	L(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Shilo Inn Klamath Falls Reference No.: 6820.018 FIL	E WITH KL	AMATH COUNTY, OF	₹			

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 2015-012047 filed 11/3/15 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME NATIXIS REAL ESTATE CAPITAL LLC 12b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) 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 SHILO INN, KLAMATH FALLS, LLC 13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): 17. Description of real estate: 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):

UCC FINANCING STATEMENT AMENDMENT ADDENDUM (Form UCC3Ad) (Rev. 04/20/11)

18. MISCELLANEOUS: