

## **UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

2021-009087

Klamath County, Oregon

06/08/2021 03:14:04 PM

Fee: \$87.00

Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fa	ax: 818-662-4141				
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com					
C SEND ACKNOW! EDGMENT TO ALL LALL	Corning Credit	-	•		
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Lien Solutions 769	79760			<b>*</b>	
Glendale, CA 91209-9071 ORG	OR		4		
l FIX	TURE ,		-		
File with: Klamath, OR		THE ABOVE S	PACE IS EC	OR FILING OFFICE U	ISE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER		b. This FINANCING ST	ATEMENT AM	ENDMENT is to be filed	
2020-007222 6/12/2020 CC OR Klamath		(or recorded) in the F	PEAL ESTATE	RECORDS m UCC3Ad) <u>and</u> provide De	
TERMINATION: Effectiveness of the Financing Statement identified ab Statement	ove is terminated with	respect to the security intere	st(s) of Secure	d Party authorizing this	Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or For partial assignment, complete items 7 and 9 and also indicate affective and also indicate affective for partial assignment.	7b, <u>and</u> address of Ass ted collateral in item 8	signee in item 7c <u>and</u> name	of Assignor in	tem 9	
CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law	above with respect to th	e security interest(s) of Sec	ured Party auth	orizing this Continuation	Statement is
5. PARTY INFORMATION CHANGE:		$\overline{}$			· · · · · · · · · · · · · · · · · · ·
Chiesia di mese two boxos,	one of these three boxe CHANGE name and/or ad		name: Comple	te Item DELETE 02m	e: Give record name
This Change affects Debtor or Secured Party of record	em 6a or 6b; and item 7a	or 7b <u>and</u> item 7c 7a o	7b, and item 7	to be deleted	in item 6a or 6b
<ol> <li>CURRENT RECORD INFORMATION: Complete for Party Information Char 6a. ORGANIZATION'S NAME</li> </ol>	nge - provide only <u>one</u>	name (6a or 6b)	-	_	
		-	- 9		
OR 6b. INDIVIDUAL'S SURNAME HEAVENER	FIRST PERSONAL	NAME	ADDITION	IAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information		te name (7a or 7b) (use exact, full r	ame: do not omit in	ondify or appreviate any part of	the Debtor's name)
7a. ORGANIZATION'S NAME				7	
OR 7b. INDIVIDUAL'S SURNAME			T	····	···
INDIVIDUAL'S FIRST PERSONAL NAME			<del></del>		Marina Tari and San
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			<del></del>		SUFFIX
					1
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE	overed collateral	ASSIGN collateral
Indicate collateral: Debtor Name and Address: HEAVENER, CRYSTAL - 4841 FRIEDA AVE, KLAMATH FAL		-			
TILAVENER, OR ISTAL - 404 FRIEDA AVE. KI AMATH FAL					
	LS, OR 97603				
Secured Party Name and Address:	LS, OR 97603				
	.LS, OR 97603				
Secured Party Name and Address:	.LS, OR 97603				
Secured Party Name and Address: CCU - One Credit Union Plaza , Corning, NY 14830  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS	AMENDMENT: Prov		) (name of Ass	gnor, if this is an Assignr	nent)
Secured Party Name and Address: CCU - One Credit Union Plaza , Corning, NY 14830  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS If this is an Amendment authorized by a DEBTOR, check here and prov			) (name of Ass	gnor, if this is an Assignn	nent)
Secured Party Name and Address: CCU - One Credit Union Plaza , Corning, NY 14830  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS If this is an Amendment authorized by a DEBTOR, check here and proved the second second proved and proved the second party of the second proved party of the second party of	AMENDMENT: Prov		) (name of Ass	ignor, if this is an Assignr	nent)
Secured Party Name and Address: CCU - One Credit Union Plaza , Corning, NY 14830  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS If this is an Amendment authorized by a DEBTOR, check here and proves a ORGANIZATION'S NAME	AMENDMENT: Prov	J Debtor		gnor, if this is an Assignr AL NAME(S)/INITIAL(S)	nent)
Secured Party Name and Address: CCU - One Credit Union Plaza , Corning, NY 14830  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS If this is an Amendment authorized by a DEBTOR, check here and proved and proved the corner of the corner	AMENDMENT: Provide name of authorizing	J Debtor			

UCC FINANCING STATEMENT AMENDMENT ADDITIONS	ENDUM
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment for 2020-007222 6/12/2020 CC OR Klamath	orm
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendme	ent form
12a, ORGANIZATION'S NAME  CCU	THE COLUMN TO TH
OR 126, INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate	required for indexing purposes only in some filling offices - see Instruction item 13): Provide only
13a. ORGANIZATION'S NAME	+ ( - )
	PERSONAL NAME  ADDITIONAL NAME(S)/INITIAL(S)  SUFFIX
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):  15. This FINANCING STATEMENT AMENDMENT:	17. Description of real estate:
covers timber to be cut covers as-extracted collateral is filed as a fixture.  16. Name and address of a RECORD OWNER of real estate described in item 17	
(if Debtor does not have a record interest):  CRYSTAL L NELSON & DOYLE, RAINA L NELSON	ON APN: R449429

HEAVENER8000

CCU

File with: Klamath, OR

18. MISCELLANEOUS: 76979760-OR-35 50077 - Corning Credit Union