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2021-012820 Klamath County, Oregon

UCC FINANCING STATEMENT AMENDMENT	Г			08/23/2021 08 Fee: \$82.00	:58:00 AM
A. NAME & PHONE OF CONTACT AT FILER (optional)					
B. E-MAIL CONTACT AT FILER (optional)					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
Fidelity National Title Company of Orego 900 SW 5th Ave., Lobby Level Portland, OR 97204	on 🗍				
1a. INITIAL FINANCING STATEMENT FILE NUMBER	1b			FILING OFFICE US DMENT is to be filed [f	or record] (or recorded)
35482 VOL M97 PAGE 10031 4/4/1997 CC OR Klama	ľ	in the REAL EST/	ATE RECORDS	n UCC3Ad) <u>and</u> provide (• • • • • • • • • • • • • • • • • • • •
 TERMINATION: Effectiveness of the Financing Statement identified above 	e is terminated wi	th respect to the security inte	rest(s) of Secured Pa	rty authorizing this Ter	mination Statement.
 ASSIGNMENT (full or partial): Provide name of Assignee In item 7a or 7b, For partial assignment, complete items 7 and 9 and also indicate affected coll 		ssignee in item 7c <u>and</u> name	of Assignor in item 9		
 CONTINUATION: Effectiveness of the Financing Statement identified aborthe additional period provided by applicable law 	ve with respect to	the security interest(s) of Se	cured Party authorizing	ng this Continuation St	atement is continued for
5. PARTY INFORMATION CHANGE: Chock one of these two boxes.	of these three b	aves to			
CHANG	E name and/or a	ddress: Complete A	00 name: Complete		ame: Give record name
6. CURRENT RECORD INFORMATION: Complete for Party Information Change			or 7b, and item 7c	to be deser	ed in item 6a or 6b
68. ORGANIZATION'S NAME					
Pelican Butte Oil, LLC	Temor peno		1		
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSO	INAL NAME	ADDITION	AL NAME(SYINITIAL(S	S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informa 7a. ORGANIZATION'S NAME	ation Change – provi	de only <u>one</u> name (7a or 7b) (use e	xect, full name; do not on	nit, modify, or abbreviate ar	y part of the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME				-	.
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: Also Indicate collateral:	ADD collateral	DELETE collateral	RESTATE co	vered collateral	ASSIGN collateral
NAME or SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: PI If this is an Amendment authorized by a DEBTOR, check here and provide	rovide only <u>one</u> n name of authorizi		gnor, if this is an Ass	ignment)	
98. ORGANIZATION'S NAME JPMorgan Chase Bank, National Ass		. 	l Agent		
OR 96. INDIVIDUAL'S SURNAME	FIRST PERSO			AL NAME(SYINITIAL(S	SUFFIX
AS ADTIONAL FILED DESCRIPTION DATA	<u> </u>				
10. OPTIONAL FILER REFERENCE DATA: 562440936 Debtor Name: Pelican Butt	te Oil, L	LC 00	0000700	8	