2021-017565

Klamath County, Oregon

11/23/2021 02:49:01 PM

Fee: \$82.00

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) (509) 327-9634 Ethan Sumpter B. E-MAIL CONTACT AT FILER (optional) ethan.sumpter@covius.c C. SEND ACKNOWLEDGMENT TO: (Name and Address) **Chronos Mortgage Solutions** 12410 E. Mirabeau Parkway, Ste 100 Spokane Valley, WA 99216

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE NUMBER ▼ This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS 2020-011853 Filed 9/18/2020 Filer; attach Amendment Addendum (Form UCC3Ad) 2. 📝 TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement 3. ASSIGNMENT (full or partial): Provide name of assignee in item 7a or 7b, and address of Assignee in item 7c, and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8 4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. 5. PARTY INFORMATION CHANGE: Check one of these two boxes: AND check one of these three boxes to: ___ ADD name: Complete item CHANGE name and/or address: Complete DELETE name: Give record name This Change affects Debtor or Secured Party of record item 6a or 6b; and item 7a or 7b and item 7c 7a or 7b, and item 7c to be deleted in item 6a or 6b 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX LeGault Geoff 7. CHANGED OR ADDED INFORMATION Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact full name; do not omit, modify, or abbreviate any part of the Debtor's name) 7a ORGANIZATION'S NAME 76 INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S SUFFIX 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY USA COLLATERAL CHANGE: Also check one of these four boxes. ADD collateral DELETE collateral RESTATE covered Collateral Indicate collateral

9. NAME OF SECURED PARTY OF RECORD AUT If this is an Amendment authorized by a DEBTOR check he 9a ORGANIZATION'S NAME Puget Sound Cooperative Cred	re and provide name of authorizing Debtor	name (9a or 9b) (name of Assignor, if this is an A	ssignment)
OR 96 INDIVIDUAL'S SURNAME	INDIVIDUAL'S FIRST NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA Chronos Tracking #7595167-59165	Loan #	SBA Loan #	