## GoodLeap, LLC

Record at the request of and when recorded return to:

## 2022-010456 Klamath County, Oregon

00305343		

UCC FINANCING STATEMENT AMENDME FOLLOW INSTRUCTIONS	ENT	08/29/2	:022 04:00:25	РМ	Fee: \$87.0
A. NAME & PHONE OF CONTACT AT FILER (optional)		1			
B. E-MAIL CONTACT AT FILER (optional)		1			
filings@goodleapsupport.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)		_			
GoodLeap LLC					
PO Box # 981440					
El Paso, TX 79998- 1440	1				
L		THE ABOVE	E SPACE IS FO	R FILING OFFICE US	BE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 04/28/2022 2022-005403 KLAMATH, OR		(or recorded) in the	REAL ESTATE	NDMENT is to be filled RECORDS m UCC3Ad) <u>and</u> provide D	
2. TERMINATION: Effectiveness of the Financing Statement identified a Statement	sbove is terminated v	with respect to the security	interest(s) of Sec	cured Party authorizing	this Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7e     For partial assignment, complete items 7 and 9 and also indicate affect			name of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement Identifier continued for the additional period provided by applicable law	d above with respect	to the security interest(s)	of Secured Party	authorizing this Continu	lation Statement is
5. PARTY INFORMATION CHANGE:					
Check one or these two boxes:	c <u>one</u> of these three b HANGE name and/or	address: CompleteA	DD name: Comple		ne: Give record name
This Change affects Debtor or Secured Party of record Ite	em 6a or 6b; and item	7a or 7b <u>and</u> item 7c 7	s or 7b, <u>and</u> item 7	to be deleted	in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information C 6a. ORGANIZATION'S NAME	viange - provide only	one name (oa or ob)			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAI NIANE	LADDITIO	NAL NAME(S)/INITIAL(S	) SUFFIX
Elder	Michael	VAL NAME	Abbillo	TOTE HAME (OFFICE OFFICE	,
CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Info     (7a, ORGANIZATION'S NAME)	ormation Change - provide	only <u>one</u> name (7s or 7b) (use exa	ct, full name; do not o	nit, modify, or abbreviate any p	art of the Debtor's name)
OR THE INDUSTRIALIS CURNAME					
7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME		· · · · · · · · · · · · · · · · · · ·			
					TSUFFIX
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)					SUPPIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
COLLATEDAL CHANGE: Also should any of those four bayes:	ADD collateral	DELETE collateral	RESTATE	overed collateral	ASSIGN colleteral
COLLATERAL CHANGE: Also check one of these four boxes: Indicate collaboration:    Collaboration	ADD WHAIRIAI	DELETE CONSTONAL			<b>_</b> ,
<b>******</b>					
	S AMENDMENT: I		or 9b) (name of As	signor, if this is an Assig	nment)
9a, ORGANIZATION'S NAME GOODLEAD LLC					
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSOI	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: 2005036976 TERM Debtors: Mich	nael Elder			<del></del>	

04	/28/2022 2022-005403 KLAMATH, OR						
2. ł	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as Iter	m 9 on Amendment	form				
	12a. ORGANIZATION'S NAME						
	GoodLeap LLC						
١							
₹	12b. INDIVIDUAL'S SURNAME						
ŀ	FIRST PERSONAL NAME						
ł	ADDITIONAL NAME(SYINITIAL(S)		SUFFIX				
					SPACE IS FOR FILING		
i. I	Name of DEBTOR on related financing statement (Name of a current one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or	t Debtor of record re abbreviate any part	quired for indexing of the Debtor's na	purposes only in s me); see instruction	ome thing offices - see inst as if name does not fit	truction item	13): Provid
	13a. ORGANIZATION'S NAME	· · · · · · · · · · · · · · · · · · ·					
۲	13b. INDIVIDUAL'S SURNAME Elder	FIRST PERS	ONAL NAME		ADDITIONAL NAME(S)/IN	NITIAL(S)	SUFFIX
	Lidoi	11110114101			<u>i</u>		
, 1	This FINANCING STATEMENT AMENDMENT:		17. Description		AMATH FALLS	DP 97603	1.7613
_	This FINANCING STATEMENT AMENDMENT:	iled as a fixture filin	1		LAMATH FALLS O	DR 97603	3-7613
]	covers timber to be cut covers as-extracted collateral I is fill	iled as a fixture filin	1			DR 97603	3-7613
	covers timber to be cut covers as-extracted collateral X is fit  Name and address of a RECORD OWNER of real estate described in item 17  (if Debtor does not have a record interest):	iled as a fixture filin 7	3906 Cord	onado Way K		DR 97603	3-7613
]	covers timber to be cut covers as-extracted collateral X is fit  Name and address of a RECORD OWNER of real estate described in item 17  (if Debtor does not have a record interest):	lied as a fixture filin 7	3906 Cord County APN	KLAMATH R563900			

**UCC FINANCING STATEMENT AMENDMENT ADDENDUM** 

FOLLOW INSTRUCTIONS