Record at the request of and when recorded return to: GoodLeap, LLC

2023-002076

03/27/2023 12:49:25 PM

Klamath County, Oregon



Fee: \$87.00

00312891202300020760020029

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) B. E-MAIL CONTACT AT FILER (optional) filings@goodleapsupport.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) GoodLeap LLC PO Box # 981440 El Paso, TX 79998-1440 1a. INITIAL FINANCING STATEMENT FILE NUMBER 11/22/2022 2022-0071739 KLAMATH, OR 2. Z TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. X This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

. CONTINUATION: Effectiveness of the Financing State continued for the additional period provided by applicable	ement identified above with respect to the security interest(s law) of Secured Party authorizing this Continuation	on Statement is
. PARTY INFORMATION CHANGE: Check one of these two boxes: This Change affects Debtor or Secured Party of record	Item 6a or 6b; and item 7a or 7b and item 7c	ADD name: Complete item DELETE name: 7a or 7b, <u>and</u> item 7c to be deleted in i	Give record name tem 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party 6a. ORGANIZATION'S NAME	y Information Change - provide only <u>one</u> name (6a or 6b)		
R 66. INDIVIDUAL'S SURNAME Hamilton	FIRST PERSONAL NAME James	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assign 7a, ORGANIZATION'S NAME	nment or Party Information Change - provide only <u>one</u> name (7s or 7b) (use ex	xect, full name; do not omit, modify, or abbreviate any part o	f the Debtor's name)
7b. INDIVIDUAL'S SURNAME			
INDIVIDUAL'S FIRST PERSONAL NAME			SUFFIX
INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S)	,		SUFFIX
			Į.
; MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
c. MAILING ADDRESS . COLLATERAL CHANGE: Also check one of these four Indicate collateral:			COUNTRY ASSIGN collaters

11, INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amen			
11/22/2022 2022-0071739 KLAMATH, OR	dment form		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Ar	mendment form		
12a. ORGANIZATION'S NAME			
GoodLeap LLC			
OR 12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INITIAL(S)			10E ON V
		THE ABOVE SPACE IS FOR FILING OFFICE L	
 Name of DEBTOR on related financing statement (Name of a current Debtor one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbrevial 	of record required for indexing	g purposes only in some filing offices - see instruction item	13): Provide on
	le any part or the Debtor's n	arrie), see medicione il name does not il	
13a. ORGANIZATION'S NAME			
OR 13b, INDIVIDUAL'S SURNAME	RST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
138. INDIVIDUAL S SORNAME	ames	ADDITIONAL INVIDED IN THE CONTROL OF	0000
Trainino.			
15. This FINANCING STATEMENT AMENDMENT:	' '	n of real estate:	
covers timber to be cut covers as-extracted collateral X is filed as a	' '	n of real estate: e Rd Klamath Falls OR 97603	
covers timber to be cut covers as-extracted collateral X is filed as a 16. Name and address of a RECORD OWNER of real estate described in Item 17 (if Debtor does not have a record interest):	fixture filing 3620 Val	e Rd Klamath Falls OR 97603	
covers timber to be cut covers as-extracted collateral X is filed as a 16. Name and address of a RECORD OWNER of real estate described in Item 17	fixture filing 3620 Val	e Rd Klamath Falls OR 97603	
covers timber to be cut covers as-extracted collateral X is filed as a 16. Name and address of a RECORD OWNER of real estate described in Item 17 (if Debtor does not have a record interest):	fixture filing 3620 Val	e Rd Klamath Falls OR 97603	
covers timber to be cut covers as-extracted collateral X is filed as a 16. Name and address of a RECORD OWNER of real estate described in Item 17 (if Debtor does not have a record interest):	County APN LOT:6 St	e Rd Klamath Falls OR 97603 KLAMATH	/MER:SEC

18, MISCELLANEOUS: