2024-003632

Klamath County, Oregon

05/10/2024 08:09:02 AM Fee: \$92.00

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294				
B. E-MAIL CONTACT AT SUBMITTER (optional)				
SPRFiling@cscglobal.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)			_	
2828 10100 CSC				
801 Adlai Stevenson Drive	Filed In: Oregon			
Springfield, IL 62703	(Klamath)			
SEE BELOW FOR SECURED PARTY CONTACT INF 1a. INITIAL FINANCING STATEMENT FILE NUMBER	ORMATION		CE IS FOR FILING OFFICE USE	
2022-010573 08/30/2022		(or recorded) in the REAL E (Form UCC3Ad) and provid	NT AMENDMENT is to be filed [for rec STATE RECORDS. Filer: attach Amend Debtor's name in item 13.	Iment Addendum
2. TERMINATION: Effectiveness of the Financing Statement identified a	above is terminated with res	pect to the security interest(s) of Sec	ured Part(y)(ies) authorizing this Termin	ation Statement
ASSIGNMENT: Provide name of Assignee in item 7a or 7b, <u>and</u> add For partial assignment, complete items 7 and 9; check ASSIGN Collater				
CONTINUATION: Effectiveness of the Financing Statement identifie additional period provided by applicable law	d above with respect to the	security interest(s) of Secured Party	authorizing this Continuation Statement	is continued for the
5. PARTY INFORMATION CHANGE:	-	$\overline{}$		
	Check one of these three bo	xes to:		
This Change affects Debtor or Secured Party of record	CHANGE name and/or item 6a or 6b; and item	address: Complete ADD nan 7a or 7b and item 7c 7a or 7b,	ne: Complete item DELETE name and item 7c to be deleted in	Give record name item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information				
6a. ORGANIZATION'S NAME	- T	*	-	
OR CLANDWINDLAND CHIPMAN	<u> </u>			
6b. INDIVIDUAL'S SURNAME EKLUND	PIRST PERSON DANIEL	IAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	400	7 711		
 CHANGED OR ADDED INFORMATION: Complete for Assignment or Party ORGANIZATION'S NAME 	/ Information Change - provide only	one name (/a or /b) (use exact, tull name; d	o not omit, modify, or appreviate any part of the L	eptor's name)
7b. INDIVIDUAL'S SURNAME				
_				
INDIVIDUAL'S FIRST PERSONAL NAME			7	
	#			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
7c. MAILING ADDRESS	CITY	, -	STATE POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: <u>Check only one box:</u>	ADD collateral	DELETE collateral F	ESTATE covered collateral	ASSIGN* collateral
Indicate collateral:	*Check ASSIGN COLLATERAL	only if the assignee's power to amend the rec	ord is limited to certain collateral and describe the	collateral in Section 8
ROOF				
APN: R519193 IOTS 11 AND 12 IN BLOCK 11 OF ST. FRANCIS P.	ADK ACCODDING	TO THE OFFICIAL DI	AT THEREOF ON EILE	
IN THE OFFICE OF THE COUNTY CLERK OF KLA			AT THEREOF ON THE	
SUBJECT TO ALL EASEMENTS, COVENANTS, CO	ONDITIONS, RESI	ERVATIONS, LEASES A		
RECORD, ALL LEGAL HIGHWAYS, ALL RIGHTS C	OF WAY, ALL ZON	ING, BUILDING AND O	THER LAWS,	
A MANUS OF CECURED BARTY OF RECORD AUTHORIZING T	THE AMENDMENT -			
 NAME OF SECURED PARTY OF RECORD AUTHORIZING T If this is an Amendment authorized by a DEBTOR, check here and pr 	THIS AMENDMENT: Pro- rovide name of authorizing D		e of Assignor, if this is an Assignment)	
9a. ORGANIZATION'S NAME 1st Security Bank of Was	_			
	J			
9b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: :5152264930 EK	LUND Debtor			
				2828 10100

UCC FINANCING STATEMENT AMENDMENT ADD FOLLOW INSTRUCTIONS 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form	
2022-010573 08/30/2022	
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment for	orm
12a. ORGANIZATION'S NAME 1st Security Bank of Washington	
The second of th	
OR 12b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
13. Name of DEBTOR on related financing statement (Name of a current Debtor of record requ	
one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of	the Debtor's name); see Instructions if name does not fit
13a. ORGANIZATION'S NAME	
OR 13b, INDIVIDUAL'S SURNAME FIRST PER	SONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
	ALYNN
14. ADDITIONAL SPACE FOR (CHECK ONE BOX): ITEM 8 (Collateral) OF	R OTHER INFORMATION (Please Describe)
KLAMATH COUNTY, OREGON RECORDS.	
15. This FINANCING STATEMENT AMENDMENT: ☐ covers timber to be cut ☐ covers as-extracted collateral	17. Description of real estate: IOTS 11 AND 12 IN BLOCK 11 OF ST. FRANCIS PARK ACCORDING TO TIIE OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY CLERK OF KLAMATH COUNTY, OREGON. SUBJECT TO ALL EASEMENTS, COVENANTS, CONDITIONS, RESERVATIONS, LEASES AND RESTRICTIONS OF RECORD, ALL LEGAL HIGHWAYS, ALL RIGHTS OF WAY, ALL ZONING, BUILDING AND OTHER LAWS, ORDINANCES AND REGULATIONS, ALL RIGHTS OF TENANTS IN POSSESSION, AND ALL REAL ESTATE TAXES AND

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT ADDENDUM (Form UCC3Ad) (Rev. 07/01/23)

18. MISCELLANEOUS: Fixture Filing

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS

	INSTRU	

ILING OFFICE USE	ONLY
truction item 13): Provi	de only
E(S)/INITIAL(S)	SUFFIX
CONVEYED B . M79-26114, (Y DEED
	AND PAYABLE CONVEYED B. M79-26114, CRECORDS.