UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

2024-004862 Klamath County, Oregon

06/17/2024 08:33:02 AM

Fee: \$92.00

Lien Solutions P.O. Box 29071	9935	3936				
Glendale, CA 91209-9071	ORO	R				
1.	FIXT		.			
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File with: Klamath, OR					OR FILING OFFICE	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2019-014199 12/6/2019 CC OR Klamath			1b. This FINANCING (or recorded) in the Filer: attach Amend	he REAL ESTATI	MENDMENT is to be filed E RECORDS orm UCC3Ad) <u>and</u> provide D	
TERMINATION: Effectiveness of the Financing State Statement	ement identified abov	e is terminated v	vith respect to the security in	nterest(s) of Secu	ed Party authorizing this	Termination
ASSIGNMENT (full or partial): Provide name of Assigner For partial assignment, complete items 7 and 9 and				ame of Assignor in	item 9	
CONTINUATION: Effectiveness of the Financing State continued for the additional period provided by applic		ove with respect	to the security interest(s) of	Secured Party au	thorizing this Continuatio	n Statement is
5. PARTY INFORMATION CHANGE:						
Check one of these two boxes:		ne of these three		ADD name: Comp	ete item DELETE par	me: Give record name
This Change affects Debtor or Secured Party of re	cord item	6a or 6b; <u>and</u> ite	m 7a or 7b <u>and</u> item 7c	7a or 7b, <u>and</u> item	7c to be deleted	d in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Part	y Information Change	e - provide only <u>c</u>	one name (6a or 6b)			
6a. ORGANIZATION'S NAME ALTAMONT MHP LLC						
OR 6b. INDIVIDUAL'S SURNAME		FIRST PERSO	ONIAL NAME	ADDITIO	ONIAL NIAME(C)/INITIAL(C)	SUFFIX
OD. INDIVIDUALS SURVAINE		FIRST FERS	SNAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SOFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assig	nment or Party Information	Change - provide or	nly one name (7a or 7h) (use exact	full name: do not omit	modify or abbreviate any part of	of the Debtor's name)
7a. ORGANIZATION'S NAME		g- p	., <u></u> (, (,	,	,,,	
OR 7b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
						Laussy
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
7c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
76. WAILING ADDICESS		GITT		OIAIL	TOOTALOODE	COONTIC
8. COLLATERAL CHANGE: Also check one of the	os four hoves: \square A	DD colleteral	DELETE collateral		covered collateral	ASSIGN collatera
COLLATERAL CHANGE: Also check one of the Indicate collateral:	se four boxes: LA	DD collateral	DELETE collateral	☐ KESTATE	covered collateral	ASSIGN collatera
Debtor Name and Address:						
ALTAMONT MHP LLC - 2520 BLUEBONNET LA	NE, UNIT 5 , AL	JSTIN, TX 78	704			
Secured Party Name and Address:						
FANNIE MAE - C/O WELLS FARGO BANK, NA	TIONAL ASSOCI	ATION, 1751	PINNACLE DRIVE, 8	TH FLOOR , M	ICLEAN, VA 22102	
LOAN # 820118678						
9. NAME OF SECURED PARTY OF RECORD AUT	HORIZING THIS A	MENDMENT:	Provide only one name (9a	or 9b) (name of As	ssignor, if this is an Assigi	nment)
If this is an Amendment authorized by a DEBTOR, check h		e name of autho				
9a. ORGANIZATION'S NAME FANNIE MAE						
OR 9b. INDIVIDUAL'S SURNAME		FIRST PERSO	ONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX
SS. INDIVIDUALO CONTRAME		TINOTERO	OIV LIVINE	ADDITIO	STATE INCIDIE (O)/IIVITIAE(O)	001111
10. OPTIONAL FILER REFERENCE DATA: Debtor Nai	ma: ALTAMONIT	MHDIIC				
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820118678

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	LOW INSTRUCTIONS	: t		1		
	ITIAL FINANCING STATEMENT FILE NUMBER: Same a: 9-014199 12/6/2019 CC OR Klamath	s item 1a on Amendment for	m			
	AME OF PARTY AUTHORIZING THIS AMENDMENT: Sa	me as item 9 on Amendmen	t form			
	12a. ORGANIZATION'S NAME FANNIE MAE					
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₹┡	12b. INDIVIDUAL'S SURNAME					
ŀ	FIRST PERSONAL NAME					
L						
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	THE ABOVE 6	CDACE IS EOD EILING OFFICE LIS	E ONLY
. N	ame of DEBTOR on related financing statement (Name of	a current Debtor of record re	equired for indexing	purposes only in som	SPACE IS FOR FILING OFFICE US ne filing offices - see Instruction item	
	ne Debtor name (13a or 13b) (use exact, full name; do no	t omit, modify, or abbreviate	any part of the Deb	or's name); see Instr	uctions if name does not fit	
	ALTAMONT MHP LLC					
ŀ	13b. INDIVIDUAL'S SURNAME	FIRST F	PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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FANNIE MAE

File with: Klamath, OR

820118678

18. MISCELLANEOUS: 99353936-OR-35 16804 - WELLS FARGO MULTIFAM

EXHIBIT A

DESCRIPTION OF THE LAND

BEING all that lot or parcel of land, with improvements thereon and appurtenances thereto, which is more particularly described:

Tract 13 and 14 of Subdivision of Tracts 25 to 32 inclusive together with the South 10 feet of 33 and 34 of ALTAMONT RANCH TRACTS, in the County of Klamath, State of Oregon, EXCEPT the East 10 feet thereof, conveyed to Klamath County, in Volume 168 at page 535, Deed Records of Klamath County, Oregon.

AND EXCEPT that portion of Lots 13 and 14 lying within the boundaries of the USBR A-3-F Lateral Canal.