

2024-011134

Klamath County, Oregon 12/26/2024 02:47:02 PM

Fee: \$87.00

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294)	1		
B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com		1		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
3005 51975 CSC				
801 Adlai Stevenson Drive	Filed In: Oregon			
Springfield, IL 62703	(Klamath)			
<u> </u>	`			
SEE BELOW FOR SECURED PARTY CONTACT	T INFORMATION	THE ABOVE SPA	CE IS FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2020-003347 03/18/2020		1b. This FINANCING STATEME (or recorded) in the REAL E (Form UCC3Ad) <u>and</u> provid	NT AMENDMENT is to be filed [for rec STATE RECORDS. Filer: <u>attach</u> Amend e Debtor's name in item 13.	ord] dment Addendum
2. TERMINATION: Effectiveness of the Financing Statement iden	ntified above is terminated with resp	pect to the security interest(s) of Sec	ured Part(y)(ies) authorizing this Termin	nation Statement
3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, an For partial assignment, complete items 7 and 9; check ASSIGN C				
CONTINUATION: Effectiveness of the Financing Statement ideadditional period provided by applicable law	lentified above with respect to the s	security interest(s) of Secured Party	authorizing this Continuation Statement	t is continued for the
5. PARTY INFORMATION CHANGE:				
Check one of these two boxes:	AND Check one of these three bo		on Complete item DELETE	. Character
This Change affects Debtor or Secured Party of record	CHANGE name and/or a item 6a or 6b; <u>and</u> item 7	ra or 7b <u>and</u> item 7c 7a or 7b,	ne: Complete item DELETE name and item 7c to be deleted in	: Give record name i item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Info 6a. ORGANIZATION'S NAME	ormation Change - provide only one	≘ name (6a or 6b)		
OR CONTROL AND CON	I SIDOT DEDOC		ADDITIONAL MANE (O) (INITIAL (O)	Toursey.
6b. INDIVIDUAL'S SURNAME Madsen (Debtor)	FIRST PERSON Michele	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
,		(F. 10)		
7. CHANGED OR ADDED INFORMATION: Complete for Assignment [7a. ORGANIZATION'S NAME]	or Party Information Change - provide only	one name (/a or /b) (use exact, tuli name; c	o not omit, modity, or appreviate any part of the L	Deptor's name)
OR 7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Check only one box:	ADD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN* collateral
Indicate collateral:			ord is limited to certain collateral and describe the	
Perfection Purchase Money Security Interest In				
Solar system and all of its components installed				
Parcel:3909E24B01601 Situs Address:6320 Rec				
of Ankeny Garden Tracts, according to the officia				
Oregon. For Complete Legal Description refer to	Sale instrument #201	7-008457 Date:07/28/20	717	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZI	ING THIS AMENDMENT: Prov	ride only <u>one</u> name (9a or 9b) (name	e of Assignor, if this is an Assignment)	
If this is an Amendment authorized by a DEBTOR, check here a	and provide name of authorizing D			
9a. ORGANIZATION'S NAME Community 1st Credit	Union			
OR OL INDIVIDUALIS SURNAME			L.D.D.T.O.L.L.	
9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Michele J Ma	idsen (Debtor)		•	3005 5197

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS				
11. INITIAL FINANCING STATEMENT FILE NUMBER: \$ 2020-003347 03/18/2020				
12. NAME OF PARTY AUTHORIZING THIS AMENDMEN				
12a. ORGANIZATION'S NAME Community 1st Credit Union				
Sommanity for Groun Grineri				
OR 12b. INDIVIDUAL'S SURNAME				
12b. INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX		
, , , , , , , , , , , , , , , , , , , ,	ADDITIONAL NAME(S)INITIAL(S)		THE ABOVE SPACE IS FOR FILING OFFICE	USE ONLY
13. Name of DEBTOR on related financing statement (Na				Provide only
13a. ORGANIZATION'S NAME	office, friedling, of abbreviate any part of	THE DEDICH'S HAIR	e), see msudcuons il name does not ill	
OR				
13b. INDIVIDUAL'S SURNAME	FIRST PER	RSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
14. ADDITIONAL SPACE FOR (CHECK ONE BOX):	ITEM 8 (Collateral) O	R □OTH	 HER INFORMATION (Please Describe)	
15. This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted colla 16. Name and address of a RECORD OWNER of real estate descentification (if Debtor does not have a record interest): Michele J Madsen 6320 Redding St Klamath Falls, OR 97603	<u> </u>	All Sola complet installed Parcel:F Address Abbrevi Tracts, office of Comple	on Purchase Money Security Interest on Purchase Money Security Interest on Purchase Money Security Interest of equipment including but not limited to the Solar system and all of its componed at 6320 Redding St Klamath Falls, OR897676 Alt Parcel:3909E24B01601 s:6320 Redding St, Klamath Falls, OF lated Legal Description:Lot 28 of Ankel according to the official plat thereof of the County Clerk, Klamath County, Otte Legal Description refer to Sale Inst 2008457 Date:07/28/2017	to the ents OR 97603 Situs R 97603 eny Garden n file in the Oregon. For
18. MISCELLANEOUS:	·			