2025-001455

Klamath County, Oregon

02/28/2025 01:02:01 PM

Fee: \$87.00

UCC FINANCING STATEMENT AMENDMENT

| B. E-MAIL CONTACT AT SUBMITTER (optional) | nal) | | | | |
|--|--|--|---------------------------------------|--|--|
| B. E-MAIL CONTACT AT SUBMITTER (optional) | +1 (800) 737-8012 | | | | |
| | 1 (000) 107 0012 | | | | |
| FILINGS@CORP-SMART.COM C. SEND ACKNOWLEDGMENT TO: (Name and Address) | | | | | |
| · | \neg | | | | |
| CORPSMART | 1 | | | | |
| 106 5th Ave SE Olympia, WA 98501 | 1 | | | | |
| _ | | | | | |
| SEE BELOW FOR SECURED PARTY CONTA 1a, INITIAL FINANCING STATEMENT FILE NUMBER | ACT INFORMATION 1 | | | R FILING OFFICE I MENT is to be filed [fo | |
| 020-010681 | 08/26/2020 | (or recorded) in the RI (Form UCC3Ad) and t | | | mendment Addendum |
| 2. TERMINATION: Effectiveness of the Financing Statement in | dentified above is terminated with respe | ct to the security interest(s) | of Secured Part(y) | (ies) authorizing this T | ermination Statement |
| ASSIGNMENT: Provide name of Assignee in item 7a or 7b. | | | | | |
| For partial assignment, complete items 7 and 9; check ASSIGN | | | | | |
| CONTINUATION: Effectiveness of the Financing Statemen additional period provided by applicable law | it identified above with respect to the se | curity interest(s) of Secured | Party authorizing t | his Continuation State | ment is continued for the |
| 5. PARTY INFORMATION CHANGE: | | | | | |
| Check one of these two boxes: This Change affects Debtor or Secured Party of record | AND Check one of these three boxe CHANGE name and/or ad item 6a or 6b; and item 7a | dress: Complete AD | D name: Complet or 7b, and item 7c | | ame: Give record name ed in item 6a or 6b |
| 6. CURRENT RECORD INFORMATION: Complete for Party I | | | or rb, <u>and</u> item rc | I to ue veie | eo aritem ea or go |
| 6a. ORGANIZATION'S NAME Shreeji Hospitality LLC | | | | | |
| OR 6b. INDIVIDUAL'S SURNAME | FIRST PERSONA | L NAME | ADDITION | IAL NAME(S)/INITIAL(| S) SUFFIX |
| | | | | | |
| CHANGED OR ADDED INFORMATION: Complete for Assignment Transcription of the Complete for Assignment | ent or Party information Change - provide only <u>cr</u> | e name (7a or 7b) (use exact, full r | name; do not omit, mod | lify, or abbreviate any part o | (the Debtor's name) |
| OR - | | | | | |
| 7b. INDIVIDUAL'S SURNAME | | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | | | | | |
| | | | | | Larrage service |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | | | | | SUFFIX |
| 7c. MAILING ADDRESS | MAILING ADDRESS CITY | | STATE | POSTAL CODE | COUNTRY |
| | | | | | |
| COLLATERAL CHANGE: Check only one box: Indicate collateral: | ADD collateral | DELETE collateral | RESTATE co | vered collateral | ASSIGN* collateral |

FILING OFFICE COPY = UCC FINANCING STATEMENTAMENDMENT (Form UCC3) (Rev. 07/01/23)

Shreeji - 7346405003

UCC FINANCING STATEMENT AMENDMENT ADDENDUM 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 2020-010681 08/26/2020 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a, ORGANIZATION'S NAME Gulf Coast Bank and Trust 12b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only 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 PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX OTHER INFORMATION (Please Describe) ITEM 8 (Collateral) OR 14. ADDITIONAL SPACE FOR (CHECK ONE BOX): 15. This FINANCING STATEMENT AMENDMENT: covers almber to be cut covers as-extracted collateral list filed as a fixture filing

16. Name and address of a RECORD OWNER of real estate described in Item 17
(if Debtor does not have a record interest):

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18. MISCELLANEOUS: