

Record at the request of and when recorded return to:

## 2025-001807 Klamath County, Oregon

0033957520	25000180700200	22

	Good	dLeap, LLC	00339575202500018070020022		
	C FINANCING STATEMENT AME	NDMENT	03/13/2025 1	1:01:57 AM	Fee: \$87.0
A. N.	AME & PHONE OF CONTACT AT SUBMITTER (options	al)	7		
	MAIL CONTACT AT SUBMITTER (optional) filings@goodleapsupport.com				
C. S	END ACKNOWLEDGMENT TO: (Name and Address)		†		
[	_ GoodLeap LLC				
	PO Box # 981440 _El Paso, TX 79998- 1440				
	SEE BELOW FOR SECURED PARTY CONTAC	CT INFORMATION	THE ABOVE SPA	CE IS FOR FILING OFFICE USE	ONLY
	ITIAL FINANCING STATEMENT FILE NUMBER 28/2024 2024-005496 Klamath, OR		1b. This FINANCING STATEM (or recorded) in the REAL E (Form UCC3Ad) and provided	ENT AMENDMENT is to be filed [for rec ESTATE RECORDS. Filer: <u>attach</u> Amend de Debtor's name in item 13.	ord] Iment Addendum
2. 🗸	TERMINATION: Effectiveness of the Financing Statement ide	entified above is terminated with res	pect to the security interest(s) of Sec	cured Part(y)(ies) authorizing this Termin	nation Statement
3.	ASSIGNMENT: Provide name of Assignee in item 7a or 7b, g For partial assignment, complete items 7 and 9; check ASSIGN				
4.	CONTINUATION: Effectiveness of the Financing Statement additional period provided by applicable law	identified above with respect to the	security interest(s) of Secured Party	authorizing this Continuation Statement	t is continued for the
5.	PARTY INFORMATION CHANGE:				
	eck one of these two boxes:	AND Check one of these three be CHANGE name and/or	address: Complete ADD nar	ne: Complete itemDELETE name	Give record name
	s Change affects Debtor or Secured Party of record  JRRENT RECORD INFORMATION: Complete for Party in	item 6a or 6b; and item	7a or 7b <u>and</u> item 7c	and item 7c to be deleted in	item 6a or 6b
_	a. ORGANIZATION'S NAME				
OR					
I٥	b INDIVIDUAL'S SURNAME <b>Coscinski</b>	FIRST PERSON	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	HANGED OR ADDED INFORMATION: Complete for Assignment	1	one name (7a or 7b) (use exact, full name; o	to not omit, modify, or abbreviate any part of the D	lebtor's name)
	a. ORGANIZATION'S NAME				
OR 7	5. INDIVIDUAL'S SURNAME				
F	INDIVIDUAL'S FIRST PERSONAL NAME	<del></del>		· · · · · · · · · · · · · · · · · · ·	<del></del>
-	INDIVIDUAL'S ADDITIONAL NAME(\$)/INITIAL(\$)				SUFFIX
	, , , , , , , , , , , , , , , , , , ,				
7c. M/	AILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
8.	COLLATERAL CHANGE: Check only one box:	ADD collateral	DELETE collateral	RESTATE 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
9. NA	ME OF SECURED PARTY OF RECORD AUTHORIZ his is an Amendment authorized by a DEBTOR, check here	ING THIS AMENDMENT: Pro and provide name of authorizing D		e of Assignor, if this is an Assignment)	
	a. ORGANIZATION'S NAME				
	GoodLeap LLC				
9	b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	PTIONAL FILER REFERENCE DATA: Mark Kosci 406183696 FIXTERM	nski & David Koscir	ski	Klamath	

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOWINSTRUCTIONS			
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 06/28/2024 2024-005496 Klamath, OR			
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form			
128. ORGANIZATION'S NAME			
GoodLeap LLC			
OR 12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
		THE ABOVE SPACE IS FOR FILING OFFICE (	JSE ONLY
13. Name of DEBTOR on related financing statement (Name of a current Debtor of recone Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any			rovide only
13a. ORGANIZATION'S NAME			·· -
OR 13b. INDIVIDUAL'S SURNAME FIRE	ST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Koscinski	ark		
15. This Financing Statement amendment:	17. Descriptio	n of real estate:	
covers timber to be cut covers as-extracted collateral / is filed as a fixt	·	SANN SPRINGS LN, KENO, OR 97627	
<ol> <li>Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):</li> </ol>		, , , , , , , , , , , , , , ,	
Mark Koscinski & David Koscinski	COUN	ITY Klamath	
•		PN 618923	
	^	FN 610923	
	KENO 9, LOT	WHISPERING PINES 1ST ADDITION 4 POR	I, BLOCK
18. MISCELLANEOUS: FIXTERM			
I IV I PL/IAI			