2025-002521Klamath County, Oregon 04/08/2025 12:26:01 PM

Fee: \$107.00

UCC FINANCING STATEMENT AM	ENDMENT				
FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional)		\neg			
Elderlife Financial Lending, LLC - 888- B. E-MAIL CONTACT AT FILER (optional)	228-4500				
uccfiling@elderlifefinancial.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Addre	ess)				
ELDERLIFE FINANCIAL LENDING ATTN: LEGAL DEPARTMENT 100 BLUEGRASS COMMONS BLV BUILDING 1, SUITE 120 HENDERSONVILLE, TN 37075	,]			
a. INITIAL FINANCING STATEMENT FILE NUMBER			SPACE IS FOR FILI		
		11h This FINANCING STA			
2024-003218			REAL ESTATE RECOR	RDS	
 ✓ TERMINATION: Effectiveness of the Financing State Statement ✓ ASSIGNMENT (full or partial). Provide name of Assignor For partial assignment, complete items 7 and 9 and also ✓ CONTINUATION: Effectiveness of the Financing States 	nee in item 7a or 7b, <u>and</u> addre o indicate affected collateral in i tement identified above with rei	Filer: attach Amendmen ed with respect to the security in so of Assignee in item 7c and narem 8	teAL ESTATE RECOR It Addendum (Form UCC terest(s) of Secured F rne of Assignor in item	RDS 3Ad) <u>and</u> provide Debto Party authorizing this n 9	r's name in item Termination
ASSIGNMENT (full or partial): Provide name of Assignment, complete items 7 and 9 and also For partial assignment, complete items 7 and 9 and also CONTINUATION: Effectiveness of the Financing State continued for the additional period provided by applicable PARTY INFORMATION CHANGE: Check one of these two boxes:	pnee in item 7a or 7b, <u>and</u> addre o indicate affected collateral in i tement identified above with re- le law AND Check one of these th	Filer: attach Amendmen and with respect to the security in tess of Assignee in item 7c and nar tem 8 sect to the security interest(s) of the boxes to: for addresss: Complete ADD	teal ESTATE RECOM that Addendum (Form UCC terest(s) of Secured F tree of Assignor in item Secured Party author Diname: Complete item	ADS 3Ady and provide Debto Party authorizing this n 9 rizing this Continuatio	r's name in item Termination on Statement is
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UCC FINANCING STATEMENT AMENDMENT ADDENDUM **FOLLOW INSTRUCTIONS** 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 2024-00321812. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME Elderlife Financial Lending, LLC 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 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 13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Betty Dinger 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

18. MISCELLANEOUS: