2025-002820 Klamath County, Oregon UCC FINANCING STATEMENT AMENDMENT 04/17/2025 01:41:06 PM Fee: \$82.00 **FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) JOSIE MCCARTY 541-883-6924 B. E-MAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) USDA/FARM SERVICE AGENCY 1945 MAIN STREET, SUITE 100 KLAMATH FALLS, OR 97601 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) INITIAL FINANCING STATEMENT FILE NUMBER in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 2015-0009762 TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8 CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law PARTY INFORMATION CHANGE: AND Check one of these three boxes to: Check one of these two boxes CHANGE name and/or address: Complete Item 6a or 6b; and item 7a or 7b and item 7c DELETE name: Give record name ADD name: Complete item Debtor or Secured Party of Record to be deleted in item 6a or 6b This Change affects CURRENT RECORD INFORMATION: Complete for Party Information Change – provide only one name (6a or 6b ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX YANCEY KURTIS ALAN CHANGED OR ADDED INFORMATION: Complete for Assignment or Party information Change – provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) COUNTRY STATE POSTAL CODE MAILING ADDRESS CITY ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing DEBTOR

UNITED STATES OF AMERICA ACTING THROUGH THE FARM SERVICE AGENCY

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

10. OPTIONAL FILER REFERENCE DATA: YANCEY, KURTIS ALAN

9a. ORGANIZATION'S NAME

at Counter

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