2025-005503

Klamath County, Oregon

3169 44769

07/02/2025 01:48:01 PM

Fee: \$92.00

## UCC FINANCING STATEMENT AMENDMENT

_	LOW INSTRUCTIONS				
	NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294		1		
B. E	E-MAIL CONTACT AT SUBMITTER (optional)		1		
5	SPRFiling@cscglobal.com				
	SEND ACKNOWLEDGMENT TO: (Name and Address)				
l _	3169 44769			4	
	CSC	•		- 1	
	801 Adlai Stevenson Drive	Filed In: Oregon			
l i	Springfield, IL 62703	(Klamath)			
l⊢	<del></del>			$\sim$	
	SEE BELOW FOR SECURED PARTY CONTACT INFO	RMATION	THE ABOVE SPA	ACE IS FOR FILING OFFICE	USE ONLY
	NITIAL FINANCING STATEMENT FILE NUMBER 20-016877 12/28/2020		(or recorded) in the REAL I	ENT AMENDMENT is to be filed ESTATE RECORDS. Filer: <u>attach</u> de Debtor's name in item 13.	[for record] Amendment Addendum
2.	TERMINATION: Effectiveness of the Financing Statement identified ab	oove is terminated with resp	pect to the security interest(s) of Se	cured Part(y)(ies) authorizing this	Termination Statement
3.	ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and addre				
				Y	
4.	CONTINUATION: Effectiveness of the Financing Statement identified additional period provided by applicable law	above with respect to the	security interest(s) of Secured Party	authorizing this Continuation Sta	atement is continued for the
5.	PARTY INFORMATION CHANGE:				
Ch	heck <u>one</u> of these two boxes: AND CI	heck <u>one</u> of these three bo		- 4	
Th	nis Change affects Debtor or Secured Party of record	CHANGE name and/or a item 6a or 6b; and item	address: Complete 7a or 7b and item 7c		E name: Give record name leted in item 6a or 6b
6. C	CURRENT RECORD INFORMATION: Complete for Party Information				
	6a. ORGANIZATION'S NAME BOERSMA FAMILY, LLC		7		
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAI NAME	ADDITIONAL NAME(S)/INITIA	L(S) SUFFIX
	OS. INSIVISORES SOLUTION	THEFT EROOM	AL NAME	7.557116117121171171717171717171717171717171	301117
	NUANCED OF A PRED INCORMATION.		47 7114		(
_	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party In 7a. ORGANIZATION'S NAME	nformation Change - provide only	one name (/a or /b) (use exact, full name;	do not omit, modify, or abbreviate any par	t of the Debtor's name)
OB				<i></i>	
OR					
	7b. INDIVIDUAL'S SURNAME				
	7b. INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME		( )	<b>\</b>	
			<del>()</del>	-	
-	INDIVIDUAL'S FIRST PERSONAL NAME		<del>O</del>		SUFFIX
-			<u>(O)</u>		SUFFIX
-	INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	LOTY	, O	STATE DOSTAL CODE	
-	INDIVIDUAL'S FIRST PERSONAL NAME	CiTY		STATE POSTAL CODE	SUFFIX COUNTRY USA
-	INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	CITY ADD collateral	DELETE collateral	STATE POSTAL CODE  RESTATE covered collateral	COUNTRY
7c. N	INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  WAILING ADDRESS  COLLATERAL CHANGE: Check only one box:	ADD collateral		RESTATE covered collateral	COUNTRY USA  ASSIGN* collateral
7c. N	INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  WAILING ADDRESS  COLLATERAL CHANGE: Check only one box:	ADD collateral	DELETE collateral Inly if the assignee's power to amend the rec	RESTATE covered collateral	COUNTRY USA  ASSIGN* collateral
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7c. N 8.	INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  MAILING ADDRESS  COLLATERAL CHANGE: Check only one box: Indicate collateral:	ADD collateral *Check ASSIGN COLLATERAL of	wide only one name (9a or 9b) (name	RESTATE covered collateral cord is limited to certain collateral and des	COUNTRY USA  ASSIGN* collateral scribe the collateral in Section 8
7c. N 8.	INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  WAILING ADDRESS  COLLATERAL CHANGE: Check only one box: Indicate collateral:  IAME OF SECURED PARTY OF RECORD AUTHORIZING THe this is an Amendment authorized by a DEBTOR, check here and provided the collateral and collateral	ADD collateral *Check ASSIGN COLLATERAL of	vide only <u>one</u> name (9a or 9b) (namelebtor	RESTATE covered collateral cord is limited to certain collateral and des	COUNTRY USA  ASSIGN* collateral scribe the collateral in Section 8
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## UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment 2020-016877 12/28/2020	form	]
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment	ent form	1
12a. ORGANIZATION'S NAME DIVERSIFIED FINANCIAL SERVICES, LLC		
OR 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 one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any page 1.00 one Debtor name (1.00 one Debtor name).		
13a. ORGANIZATION'S NAME	. ·	
OR 13b. INDIVIDUAL'S SURNAME	PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
14. ADDITIONAL SPACE FOR (CHECK ONE BOX):   ITEM 8 (Collateral)		on of real estate:
covers timber to be cut covers as-extracted collateral is filed as a fixture  16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): HOEFLER BROTHER, LLC  18. MISCELLANEOUS:	MERID	on of real estate: :/4 SEC 36-T38S-R11-1/2 E WILLAMETE DIAN, ATH COUNTY, OR