2025-006894

Klamath County, Oregon

08/07/2025 12:29:01 PM

Fee: \$92.00

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS

FUL	LOW INSTRUCTIONS								
	NAME & PHONE OF CONTACT AT SUBMITTER (optional)]					
	E-MAIL CONTACT AT SUBMITTER (optional)			4					
	PRFiling@cscglobal.com								
	SEND ACKNOWLEDGMENT TO: (Name and Address)			-					
Γ	4283 025		d In: OR h County						
	SEE BELOW FOR SECURED PARTY CONTACT INF	ORMATI					R FILING OFFICE		
	NITIAL FINANCING STATEMENT FILE NUMBER 20-013836 10/27/2020			1b. This FINANCING ST (or recorded) in the l (Form UCC3Ad) and	FATEME REAL ES I provide	NT AMEND STATE REC Debtor's r	MENT is to be filed [CORDS. Filer: <u>attach</u> ame in item 13.	for record Amendme] ent Addendum
2.	TERMINATION: Effectiveness of the Financing Statement identified a	above is te	rminated with res	pect to the security interest(s) of Secu	ıred Part(y	(ies) authorizing this	Terminati	on Statement
3.	ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and add For partial assignment, complete items 7 and 9; check ASSIGN Collater								
4.	CONTINUATION: Effectiveness of the Financing Statement identifie additional period provided by applicable law	d above w	ith respect to the	security interest(s) of Secure	d Party a	uthorizing	this Continuation Sta	tement is	continued for the
5.	PARTY INFORMATION CHANGE:								
С	heck <u>one</u> of these two boxes:		of these three bo						
Th	nis Change affects Debtor or Secured Party of record	CHAN- item 6a	GE name and/or a a or 6b; <u>and</u> item	address: Complete 7a or 7b <u>and</u> item 7c	DD nam a or 7b, <u>a</u>	e: Comple and item 7d			live record name m 6a or 6b
_	CURRENT RECORD INFORMATION: Complete for Party Information	on Change	- provide only on	≘ name (6a or 6b)					
	6a. ORGANIZATION'S NAME								
OR	6b. INDIVIDUAL'S SURNAME		FIRST PERSON	IAL NAME		ADDITION	IAL NAME(S)/INITIA	L(S)	SUFFIX
	Delorme		Joshua			S			
7. C	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party	/ Information	L Change - provide only	one name (7a or 7b) (use exact, ful	l name; do	not omit, mo	dify, or abbreviate any part	of the Debt	or's name)
	7a. ORGANIZATION'S NAME								
0.0									
OR	7b. INDIVIDUAL'S SURNAME								
	INDIVIDUAL'S FIRST PERSONAL NAME								
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)								SUFFIX
7c. I	MAILING ADDRESS		CITY			STATE	POSTAL CODE		COUNTRY
8.	COLLATERAL CHANGE: <u>Check only one</u> box:	ADD	collateral	DELETE collateral	RI	ESTATE co	vered collateral	AS	SSIGN* collateral
in Pa De 32	Indicate collateral: rfection PMSI-In Fixture. All Solstalled at 34694 Kerry Dr Chiloqu rcel: R235524 Situs Address: 3469 scription: Oregon Shores Unit 2 1 7710 For Complete Legal Descripti /24/2020	ar ed in, ()4 Ker st Ad	quipment DR 97624 Try Dr, (ddition	Parcel: R-35 Chiloquin, OR Tract 1184, B	e co 07-0 976	omple: 017BC 024 Al 031,	ce Solar s 04300-000 breviated Lot 2, Ho	yste Alt Leg me I	m al
lf	IAME OF SECURED PARTY OF RECORD AUTHORIZING T this is an Amendment authorized by a DEBTOR, check here and pr	rovide nam	e of authorizing D) (name	of Assigno	r, if this is an Assignn	nent)	
	9a. ORGANIZATION'S NAME Community 1st Credi	it Un	ion						
OR	9b. INDIVIDUAL'S SURNAME		FIRST PERSON	IAL NAME		ADDITION	IAL NAME(S)/INITIA	L(S)	SUFFIX
10. (OPTIONAL FILER REFERENCE DATA: Joshua S. De	elorme	e (Debto	r)				4283	025

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS								
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 2020 - 013836 10 / 27 / 2020								
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment for	orm							
12a. ORGANIZATION'S NAME								
Community 1st Credit Union								
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 requ								
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 THE PROPERTY OF THE PROPERT								
13b. INDIVIDUAL'S SURNAME FIRST PER	SONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX							
14. ADDITIONAL SPACE FOR (CHECK ONE BOX): ITEM 8 (Collateral) OF	OTHER INFORMATION (Please Describe)							
15. This FINANCING STATEMENT AMENDMENT:	17. Description of real estate:							
covers timber to be cut covers as-extracted collateral is filed as a fixture filling 16. Name and address of a RECORD OWNER of real estate described in item 17	— · · · · · · · · · · · · · · · · · · ·							
(if Debtor does not have a record interest):	equipment including the complete Solar system installed at 34694 Kerry Dr							
Joshua S Delorme	Chiloquin, OR 97624 Parcel:							
34694 Kerry Dr	R-3507-017BC-04300-000 Alt Parcel:							
Chiloquin, OR 97624	R235524 Situs Address: 34694 Kerry Dr,							
	Chiloquin, OR 97624 Abbreviated Legal							
	Description: Oregon Shores Unit 2 1st							
	Addition Tract 1184, Block 31, Lot 2,							
	Home Id 327710 For Complete Legal							
	Description refer to Sale Instrument							
	#2020-009071 Date: 07/24/2020							
	#2020-000011 Date. 01/24/2020							

18. MISCELLANEOUS: