State of Washington

PLEASE TYPE FORM — IF AN ERROR IS MADE, CORRECT ALL COPIES

This **UCC-3 CHANGE STATEMENT** is presented for filing pursuant to the Washington Uniform Commercial Code, chapter 62A.9; Crop Lien filings, chapter 60.11 and Processor and Preparer Liens chapter 60.13 RCW.

1. DEBTOR(S) *(see instruction #1)*
☐ PERSONAL *(last, first, middle name and address)*
☒ BUSINESS *(legal business name and address)*

Cavenham Forest Industries, Inc.
1500 S.W. 1st Avenue
Portland, OR 97201

Debtor 1
SSN:
FEIN: 222-6[illegible]-3372

Debtor 2
SSN:
FEIN:

2. FOR OFFICE USE ONLY — DO NOT WRITE IN THIS BOX

2405A

FILED FOR RECORD
SKAMANIA CO. WASH
BY The Travelers

Registered
Indexed, Dir
Indirect
Filmed
Mailed

JUN 25 10 25 AM '91
E Mayfield, Dep.

TRADE NAME, DBA, AKA:

3. SECURED PARTY(IES) *(name and address)*

The Traveler[illegible] Insurance Company
4 Orinda Way, Suite 200A
Orinda, CA 94563

Loan No. 502303

4. ASSIGNEE(S) of SECURED PARTY(IES) if applicable *(name and address)*

INSTRUMENT NO. 2405A
FILED BY Travelers Ins. Co
AT 10:25 A M June 25, 1991
L. Bowen
DEPUTY COUNTY AUDITOR
SKAMANIA COUNTY, WASH.

5. This change statement effects the original filing statement recorded with the Department of Licensing. List one number and date only.
Original filing number 2420 12-5-25-200 (Skamania Cty., WA) Dated 8/19/86

6. FEES: A $7.00 filing fee is required for each action checked in box 7, except termination which requires no fee. If additional sheets are attached for any of the actions, the filing fee for each action shall be $14.00.
NUMBER OF ADDITIONAL SHEETS ATTACHED:

7. Please check one or more of the following actions:

☒ CONTINUATION. The original financing statement between the Debtor(s) and Secured Party(ies), bearing file number shown in box 5, is still effective.

☐ FULL ASSIGNMENT. All of the Secured Party's rights under the financing statement bearing file number shown in box 5 have been assigned to the Assignee(s) whose name(s) and address(es) appear in box 4.

☐ PARTIAL ASSIGNMENT. The Secured Party's rights under the financing statement bearing file number shown in box 5, to the property described in box 8, have been assigned to the Assignee(s) whose name(s) and address(es) appear in box 4.

☒ AMENDMENT. Financing statement bearing file number shown in box 5 is amended as set forth in box 8.

☐ PARTIAL RELEASE. Secured Party releases the collateral described in box 8 from the financing statement bearing file number shown in box 5.

☐ TERMINATION. Secured Party(ies) no longer claims a security interest under the financing statement bearing file number shown in box 5.

8. DESCRIPTION of partial assignment, amendment or partial release: *(Attach additional 8½" x 11" sheet(s) if needed.)*

The Travelers Insurance Company
One Tower Square - 2BP
Hartford, CT 06183-2021
Attn: Investment Administration

9. DEBTOR NAME(S) AND SIGNATURE(S)

TYPE NAME(S) OF DEBTOR(S) AS IT APPEARS IN BOX 1

SIGNATURE(S) OF DEBTOR(S)

SIGNATURE(S) OF DEBTOR(S)

10. SECURED PARTY NAME(S) AND SIGNATURE(S)

The Travelers Insurance Company
TYPE NAME(S) OF SECURED PARTY(IES) AS IT APPEARS IN BOX 3 OR 4

Gregory F. Lynch
Assistant Director
SIGNATURE(S) OF SECURED PARTY(IES)

SIGNATURE(S) OF SECURED PARTY(IES)

11. RETURN ACKNOWLEDGMENT COPY TO:

The Travelers Insurance Company
One Tower Square - 2BP
Hartford, CT 06183-2021
Attn: Katherine Lynch
(203)277-4135

12. FILE WITH:

UNIFORM COMMERCIAL CODE
DEPARTMENT OF LICENSING
P.O. BOX 9660
OLYMPIA, WA 98[illegible]-9607

MAKE CHECKS PAYABLE TO THE DEPARTMENT OF LICENSING

13. FOR OFFICE USE ONLY:

Images To Be Filmed ☐

FORM APPROVED FOR USE IN THE STATE OF WASHINGTON (R/10/89)

WASHINGTON UCC-3

COPY 1 - FILING OFFICER