

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294	
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
112601367 - 308510 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Washington (Skamania)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 2012180020 02/08/2012		1b. <input checked="" type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13	
2. <input checked="" type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement			
3. <input type="checkbox"/> 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			
4. <input type="checkbox"/> 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			
5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check one of these two boxes: <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record AND Check one of these three boxes to: <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b			
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)			
6a. ORGANIZATION'S NAME			
OR	6b. INDIVIDUAL'S SURNAME KRALL	FIRST PERSONAL NAME RAY	ADDITIONAL NAME(S)/INITIAL(S) L
7. 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)			
7a. ORGANIZATION'S NAME			
OR	7b. INDIVIDUAL'S SURNAME		
	INDIVIDUAL'S FIRST PERSONAL NAME		
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		
	SUFFIX		
7c. MAILING ADDRESS		CITY	STATE
		POSTAL CODE	COUNTRY
8. <input type="checkbox"/> COLLATERAL CHANGE: Also check one of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral			
Indicate collateral: APN: 03-08-20-4-1-1000-00 ABV LEGAL: PTN SE QTR NE QTR NE QTR SEC 20, TWN 3 N, R 8 E, SKAMANIA COUNTY, WASHINGTON			

ALL FIXTURES AND OTHER ARTICLES OF PERSONAL PROPERTY NOW OR HEREAFTER OWNED BY DEBTOR, AND/OR HEREAFTER ATTACHED OR AFFIXED TO THE REAL PROPERTY, TOGETHER WITH ALL ACCESSIONS, PARTS, AND ADDITIONS TO, ALL REPLACEMENTS OF, AND ALL SUBSTITUTIONS FOR, ANY OF SUCH

9. 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 <input type="checkbox"/> and provide name of authorizing Debtor			
9a. ORGANIZATION'S NAME Columbia State Bank			
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)
			SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor: KRALL, RAY L: 1080/1109004878			

112601367

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form
2012180020 02/08/2012

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

OR	12a. ORGANIZATION'S NAME Columbia State Bank	
	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

OR	13a. ORGANIZATION'S NAME			
	13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

PROPERTY; AND TOGETHER WITH ALL ISSUES AND PROFITS THEREON AND PROCEEDS (INCLUDING WITHOUT LIMITATION ALL INSURANCE PROCEEDS AND REFUNDS OF PREMIUMS) FROM ANY SALE OR OTHER DISPOSITION OF THE PERSONAL PROPERTY. THE REAL PROPERTY IS LOCATED AT: 481 SMITH-BECKON RD, CARSON, WA 98610

LEGAL DESCRIPTION: A tract of land in the Southeast Quarter of the Northeast Quarter and in the Northeast Quarter of the Southeast Quarter all in Section 20, Township 3 North, Range 8 East in the County of Skamania, State of Washington, described as follows: Beginning at the Southwest corner of the Northeast Quarter of the Northeast Quarter of said Section 20; thence South 65 rods; thence East 56 rods to the true point of beginning; thence East 24 rods; thence South 20 rods; thence West 24 rods; thence North 20 rods to the true point of beginning. EXCEPT that portion conveyed to Skamania County by instrument recorded August 10, 1994 in Book 145, Page 106, Deed records.

15. This FINANCING STATEMENT AMENDMENT:

☐ covers timber to be cut ☐ covers as-extracted collateral ☐ is filed as a fixture filing
16. Name and address of a RECORD OWNER of real estate described in item 17
(if Debtor does not have a record interest):

17. Description of real estate:

18. MISCELLANEOUS: