

Record at the request of and
when recorded return to:
GoodLeap, LLC

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

| |
|--|
| A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) |
| B. E-MAIL CONTACT AT SUBMITTER (optional) filings@goodleapsupport.com |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) GoodLeap, LLC PO Box # 981440 El Paso, TX 79998- 1440 |
| SEE BELOW FOR SECURED PARTY CONTACT INFORMATION |

Skamania County, WA
Total: \$304.50 Pgs=2

2025-000641

05/05/2025 12:28 PM

UCCTERM

Request of: COLUMBIA GORGE TITLE- SKAMANIA

eRecorded by: Simplifile

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

| | | |
|--|--|--|
| 1a. INITIAL FINANCING STATEMENT FILE NUMBER 2024-001519 | 10/16/2024 | 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(ies) authorizing this Termination Statement | | |
| 3. <input type="checkbox"/> ASSIGNMENT: 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; check ASSIGN Collateral box in Item 8 and describe the 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. PARTY INFORMATION CHANGE: Check <u>one</u> of these two boxes: <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record AND Check <u>one</u> 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 <u>one</u> name (6a or 6b) | | |
| 6a. ORGANIZATION'S NAME | | |
| OR | 6b. INDIVIDUAL'S SURNAME PRINCE | FIRST PERSONAL NAME ANGELIQUE |
| | | ADDITIONAL NAME(S)/INITIAL(S) |
| | | SUFFIX |
| 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only <u>one</u> 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. COLLATERAL CHANGE: Check only <u>one</u> box: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN* collateral Indicate collateral: *Check ASSIGN COLLATERAL only if the assignee's power to amend the record is limited to certain collateral and describe the collateral in Section 8 | | |
| 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only <u>one</u> 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 GoodLeap, LLC | | |
| OR | 9b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME |
| | | ADDITIONAL NAME(S)/INITIAL(S) |
| | | SUFFIX |
| 10. OPTIONAL FILER REFERENCE DATA: 2416215674 TERM ANGELIQUE PRINCE | | |

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form

2024-001519 10/16/2024

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

12a. ORGANIZATION'S NAME

GoodLeap,LLC

OR

12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

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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

13a. ORGANIZATION'S NAME

OR

13b. INDIVIDUAL'S SURNAME

PRINCE

FIRST PERSONAL NAME

ANGELIQUE

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

14. ADDITIONAL SPACE FOR (CHECK ONE BOX):

☐

ITEM 8 (Collateral)

OR

☐

OTHER INFORMATION (Please Describe)

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):

ANGELIQUE PRINCE

17. Description of real estate:

9632 WASHOUGAL RIVER RD, WASHOUGAL, WA,
98671

COUNTY SKAMANIA

APN 02053140070100

CITY/MUNI/TWP:100 MAP REF:MAP R2 P

18. MISCELLANEOUS: