



EFS-3

STATE OF OREGON
Corporation Division - UCC
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OREGON SECRETARY OF STATE



EFS

LIEN NO. 6695027-4

SILVA, CRISPIN

Statement Of Termination, Continuation, Assignment, Amendment

PLEASE TYPE OR PRINT LEGIBLY. READ INSTRUCTIONS BEFORE FILLING OUT FORM.

A. THIS STATEMENT REFERS TO ORIGINAL FINANCING STATEMENT NUMBER: 6695027 DATE FILED: 09/16/2004

This filing supersedes all previous information associated with this filing number. Please complete this form with all the current information.

B. TYPE OF AMENDMENT (CHECK ALL BOXES THAT APPLY)

- Unchecked box: LAPSE/TERMINATION (NO FEE). The Secured Party certifies that they no longer claim interest under the financing statement bearing the file number shown in SECTION A.
Checked box: CONTINUATION. Submitted within six months prior to expiration date.
Unchecked box: ASSIGNMENT. The Secured Party assigns to the Assignee whose name and address is shown in SECTION F and bearing the file number shown in SECTION A.

C. NAME(S) OF PERSON(S) SUBJECTING FARM PRODUCTS TO THE SECURITY INTEREST

- 1. Silva, Crispin
2. Silva, Karen Marie
3. Crispins Creations

Mark One:
If Individual, list last name first.
- Business [] - Individual [X]
- Business [] - Individual [X]
- Business [X] - Individual []

D. MAILING ADDRESS

- 1. 31997 S. Ona Way, Molalla, OR 97038-9245
2. 31997 S. Ona Way, Molalla, OR 97038-9245
3. 31997 S. Ona Way, Molalla, OR 97038-9245

E. SECURED PARTY NAME(S) AND ADDRESS(ES)

- 1. United States of America acting through Farm Service Agency
2. 650 Hawthorne Ave SE, Suite 130
3. Salem, OR 97301

F. ASSIGNEE NAME AND ADDRESS (If any)

- 1.
2.
3.

Table with 4 columns: FARM PRODUCT CODE, COUNTY CODE, CROP YEAR (If applicable), AMOUNT (If applicable). Rows include codes 0907 and 0904 with county 03 and amount ALL.

Debtor Secured Party
The requirement that a document be signed, authorized or otherwise authenticated by the debtor is satisfied if the debtor has executed a security agreement against a security interest in the farm products to the secured party ORS Chapter 80.115 (7).

RETURN TO: Farm Service Agency
650 Hawthorne Ave SE, Suite 130
Salem, OR 97301

FEES
Make check for \$15.00 payable to "Corporation Division"
Note: Filing fees may be paid with VISA, MasterCard, American Express or Discover card. The card number and expiration date should be submitted on a separate sheet of paper for your protection.
DO NOT SUBMIT DUPLICATES OF THIS FILING OR ITS ATTACHMENTS