



EFS-3

STATE OF OREGON
Corporation Division - L
255 Capitol St. NE, Suite
Salem, OR 97310-13
(503)986-2200 Fax (503)3
sos.oregon.gov/busine

FILED: JAN 09, 2025 02:43 PM
OREGON SECRETARY OF STATE



EFS

LIEN NO. 319757-10

KESSLER FARMS, INC.

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: 319757 DATE FILED: 01/10/1995

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)

☐ 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.

☒ CONTINUATION. Submitted within six months prior to expiration date.

☐ 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. Kesler Farms, Inc.

2. _____

3. _____

D. MAILING ADDRESS

1. 3331 Grey Blvd, Nyssa OR 97913

2. _____

3. _____

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

1. Northwest Farm Credit Services, PCA, 308 SE 10th St, Ontario OR 97914

2. _____

3. _____

F. ASSIGNEE NAME AND ADDRESS (If any)

1. _____

2. _____

3. _____

G. FARM PRODUCT CODE	COUNTY CODE	CROP YEAR (If applicable)	AMOUNT (If applicable)
0803	- 23	-	-
0102	- 23	-	-
0205	- 23	-	-
0406	- 23	-	-
0403	- 23	-	-
0106	- 23	-	-

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: Northwest Farm Credit Services, PCA
308 SE 10th St
Ontario, OR 97914

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

**EFS-3**

STATE OF OREGON
Corporation Division – UCC
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327
(503) 986-2200 Facsimile (503) 373-1166
sos.oregon.gov/business

ADDENDUM

NOTE: THIS FORM MUST ALWAYS ACCOMPANY AN EFS-3
PLEASE TYPE OR PRINT LEGIBLY

THIS STATEMENT REFERS TO ORIGINAL FINANCING STATEMENT NUMBER: 319757**DATE FILED: 01/10/1995****Additional Farm Products:****Product Code: County Code:**

0818 23

0405 23

0204 23