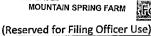


EFS-3

STA' Corpo 255 Ca Sale (503)986-

FILED: JAN 31, 2019 03:33 PM OREGON SECRETARY OF STATE







http://www.FilingInOregon.com Statement Of Termination, Continuation, Assignment, Amendment

EFS

	PLEASE TYPE OR PR	RINT LEGIBLY, READ	INSTRUCTIONS BEFORE FILLING OUT FO	
A. THIS STATEMENT REFERS TO ORIGINAL FINANCING STATEMENT NUMBER: 90026569				DATE FILED: 04/15/14
This filing supersedes all prev	vious information asso	ciated with this fi	ling number. Please complete this f	orm with all the current information.
B. TYPE OF AMENDMENT (CH				
LAPSE/TERMINATION (NO	FEE). The Secured Pa number shown	rty certifies that to in SECTION A.	they no longer claim interest under	the financing statement bearing the file
CONTINUATION. Submitted	within six months pr	ior to expiration	date.	
ASSIGNMENT. The Secured SECTION A.	Party assigns to the As	signee whose na	me and address is shown in SECTIO	N F and bearing the file number shown in
C. NAME(S) OF PERSON(S) SUBJECTING FARM PRODUCTS TO THE SECURITY INTEREST				Mark One: If Individual, list last name first.
1. Mountain Spring Farms, LLC				🔀 - Business 🔲 - Individual
2.				Business Individual
3.				- Business - Individual
D. MAILING ADDRESS				
1. 3555 Oak Grove Road,	Rickreall, OR 973	71-9709		
2.			;	
	···	-		
S. SECURED PARTY NAME(S)	AND ADDRESS(ES)			
L. Bank of America, 70 Ba	• •	d Farmingto	n CT 06032	
				
2				
3				
ASSIGNEE NAME AND ADD	RESS (If any)			
1	-			
2				
3.				
G. FARM PRODUCT CODE	COUNTY	CODE	CROP YEAR (If applicable)	AMOUNT (If applicable)
0314	- 2	7	-	-
0909	- 2	7	•	· · · · · · · · · · · · · · · · · · ·
0504	- 2	7	-	-
				-
-				
	-	· · · · · · · · · · · · · · · · · · ·	-	-
	<u>-</u>		· · · · · · · · · · · · · · · · · · ·	
•			Shora K. I.	60e -
Debtor			Secured Party	- Andrew Age Street Street
he requirement that a docum	ent be signed, autho	rized or otherw	ise authenticated by the debtor i	s satisfied if the debtor has executed a

RETURN



security agreement against a security interest in the farm products to the secured party ORS Chapter 80.115 (7).

P.O. Box 29071 Glendale, CA 91209-9071 UCCFilingReturn@wolterskluwer.com **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