

EFS-3

STATE OF OREG Corporation Division -255 Capitol St. NE, Sui Salem, OR 97310-1: (503)986-2200 Fax (503); http://www.FilinglnOregu

**EFS** 

FILED: OCT 20, 2020 02:33 PM OREGON SECRETARY OF STATE



LIEN NO. 90614823-2

MARTIN, SKYLER WAYNE

(Reserved for Filing Officer Use)

## Statement Of Termination, Continuation, Assignment, Amendment

	TELTISE THE ON TRINCI EEGIDETI NE	THE MISSING STREET, ST	
A. THIS STATEMENT REFERS TO			DATE FILED: 10/21/2015
This filing supersedes all previou	s information associated with thi	is filing number. Please complete this fo	orm with all the current information.
B. TYPE OF AMENDMENT (CHECK			t et al.
LAPSE/TERMINATION (NO FEI	E). The Secured Party certifies the number shown in SECTION A.	at they no longer claim interest under t	he financing statement bearing the file
CONTINUATION. Submitted with	thin six months prior to expiration	on date.	
ASSIGNMENT. The Secured Part SECTION A.	y assigns to the Assignee whose	name and address is shown in SECTION	IF 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. Martin, Skyler Wayne			🗌 - Business 🔀 - Individual
2. Martin, Danielle Marie			🗌 - Business 💢 - Individual
3			🗌 - Business 🔲 - Individual
D. MAILING ADDRESS			
1. 29167 Highway 86, Baker	City, OR 97814		
2. 29167 Highway 86, Baker	City, OR 97814		
3.			
E. SECURED PARTY NAME(S) AN	D ADDRESS(ES)		
1. Banner Bank, PO Box 1589	), Bothell, WA 98041		
2.			
3.			
F. ASSIGNEE NAME AND ADDRES	SS (If any)		
2			
G. FARM PRODUCT CODE	COUNTY CODE	CROP YEAR (If applicable)	AMOUNT (If applicable)
0204	- 01	chor TEAR (II applicable)	-
•	<del>.</del>		
1001	- 01		
	-	<del>-</del>	
		-	-
	-	-	-
	-	-	-
		Natalie Poiss	3,VP for Banner Bank
Debtor	·	Secured Party	/ Danie Dank

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:



Lien Solutions

OR SOS 76335627

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