



EFS-3

STATE OF OREGON  
Corporation Division - UCC  
255 Capitol St. NE, Suite 151  
Salem, OR 97310-1327  
(503)986-2200 Fax (503)373-1166  
http://www.FilingInOregon.com



EFS

LIEN NO. 89195322-3

FLYLING J FARMS, LLC

(Reserved for Filing Officer Use)

**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: 89195322 DATE FILED: 05/16/2012

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. Flying J Farms, LLC
2. Rohner, John Taylor
3. \_\_\_\_\_

Mark One:

If Individual, list last name first.

- Business  - Individual

- Business  - Individual

- Business  - Individual

D. MAILING ADDRESS

1. 40533 POCAHONTAS ROAD, BAKER CITY, OR 97814
2. 40533 POCAHONTAS ROAD, BAKER CITY, OR 97814
3. \_\_\_\_\_

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

1. Northwest Farm Credit Services, PCA 3370 10TH STREET, BAKER CITY, OR 97814
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)
0106	- 01	-	-
0203	- 01	-	-
0204	- 01	-	-
0303	- 01	-	-
0311	- 01	-	-
0314	- 01	-	-

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 FCS Attn: uz  
650 Hawthorne Ave SE, Ste 210  
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



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**ADDENDUM**

NOTE: THIS FORM MUST ALWAYS ACCOMPANY AN EFS-3  
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A. THIS STATEMENT REFERS TO ORIGINAL FINANCING STATEMENT NUMBER: 89195322      DATE FILED: 05/16/2012

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

4. \_\_\_\_\_  
 5. \_\_\_\_\_  
 6. \_\_\_\_\_

Mark One:

If Individual, list last name first.

<input type="checkbox"/> - Business	<input type="checkbox"/> - Individual
<input type="checkbox"/> - Business	<input type="checkbox"/> - Individual
<input type="checkbox"/> - Business	<input type="checkbox"/> - Individual

D. MAILING ADDRESS (CONTINUED)

4. \_\_\_\_\_  
 5. \_\_\_\_\_  
 6. \_\_\_\_\_

G. FARM PRODUCT CODE      COUNTY CODE      CROP YEAR (if applicable)      AMOUNT (if applicable)

0405	-	01	-	-
0811	-	01	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-