



EFS-3

STATE OF OREGON
Corporation Division - UCC
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OREGON SECRETARY OF STATE



EFS

LIEN NO. 92715969-1

SEIFER FARM, LLC

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: 92715969

DATE FILED: 2/19/2021

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. Seifer Farm, LLC
2.
3.

Mark One:

If Individual, list last name first.

- Business - Individual
- Business - Individual
- Business - Individual

D. MAILING ADDRESS

- 1. 11045 Waypark Drive NE, Salem, OR 97305-9245
2.
3.

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

- 1. Citizens Bank, PO Box 30, Corvallis, OR 97339
2.
3.

F. ASSIGNEE NAME AND ADDRESS (If Any)

- 1.
2.
3.

Table with 4 columns: G. FARM PRODUCT CODE, COUNTY CODE, CROP YEAR (If applicable), AMOUNT (If applicable). Rows include codes like 0306, 0310, 0803, 0804, 0807, 0811, 0821, 0825.

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 Ch. 80.115 (7)

RETURN TO (Please type within the box)

Lien Solutions
PO Box 29071
Glendale, CA 91209-9071

FEES

Make check for \$15.00 payable to "Corporation Division."

No fee for Termination

Note: Filing fees may be paid with Visa or MasterCard. 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