APN: 1318-22-002-103

AFTER RECORDING RETURN

TO: McCoy & Orta PC Vanessa A. Orta

100 N. Broadway Ave., 26th Floor Oklahoma City, Oklahoma 73102

Telephone: 888-236-0007 Matter Name: Meadow Brook

Reference No:

Lument Loan No.: 10103391 Fannie Mae No.: 1717466751 DOUGLAS COUNTY, NV

Rec:\$90.00

\$90.00

Pgs=4

04/01/2021 10:14 AM

2021-964660

MCCOY & ORTA, P.C.

KAREN ELLISON, RECORDER

## UCC FINANCING STATEMENT

This page added to provide additional information required by NRS 111.312 Sections 1-2 (Additional recording fee applies).

This cover page must be typed or printed clearly in black ink only.

UCC FINANCING STATEMENT AMENDM	FNT				
FOLLOW INSTRUCTIONS	_141			Λ	
A. NAME & PHONE OF CONTACT AT FILER (optional) Mary Dougherty 405-236-0003			(	\	
B. E-MAIL CONTACT AT FILER (optional)			\		
mdougherty@mccoy-orta.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)				\ \	
<u> </u>	_			\ \	
McCoy & Orta, P.C. 100 N. Broadway, 26th Floor	1	_		\ \	
Oklahoma City, OK 73102		/		\ \	
Loan No. 10103391				-1	
L		THE ABOVE S	SPACE IS FOR FILIN	NG OFFICE USE C	NII V
1a. INITIAL FINANCING STATEMENT FILE NUMBER	1		ATEMENT AMENDMEN EAL ESTATE RECORI	The second secon	
#2015-874640 filed on 12/30/2015		(or recorded) in the R Filer: <u>attach</u> Amendmen	EAL ESTATE RECORI t Addendum (Form UCC3	DS IAd) <u>and</u> provide Debtor	's name in item 13
<ol> <li>TERMINATION: Effectiveness of the Financing Statement identified Statement</li> </ol>	d above is terminated wi	th respect to the security in	terest(s) of Secured Pa	arty authorizing this T	Termination
<ol> <li>ASSIGNMENT (full or partial): Provide name of Assignee in item 7         For partial assignment, complete items 7 and 9 and also indicate affe     </li> </ol>		Assignee in item 7c <u>and</u> nar	me of Assignor in item	9	
<ol> <li>CONTINUATION: Effectiveness of the Financing Statement identificant continued for the additional period provided by applicable law</li> </ol>	fied above with respect t	o the security interest(s) of	Secured Party authoriz	zing this Continuation	n Statement is
5. PARTY INFORMATION CHANGE:		\/			
	eck <u>one</u> of these three boo CHANGE name and/or ac item 6a or 6b; <u>and</u> item 7a		name: Complete item	DELETE name: 0	Sive record name
This Change affects Debtor or Secured Party of record  6. CURRENT RECORD INFORMATION: Complete for Party Information	1000	70.	r 7b, <u>and</u> item 7c	to be deleted in ite	em 6a or 6b
8a. ORGANIZATION'S NAME	g. p				
OR 8b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIONAL NA	ME(S)/INITIAL(S)	SUFFIX
/ /		/			
<ol> <li>CHANGED OR ADDED INFORMATION: Complete for Assignment or Party [7a. ORGANIZATION'S NAME</li> </ol>	Information Change - provide or	ily <u>one</u> name (7a or 7b) (use exact, t	full name; do not omit, modify	, or abbreviate any part of t	the Debtor's name)
7a. ORGANIZATIONS NAIVE	1	\ \			
7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME		/ /			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTA	AL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE covered (	collateral A	SSIGN collateral
Indicate collateral:					
\ \					
<ol> <li>NAME OF SECURED PARTY OF RECORD AUTHORIZING THE If this is an Amendment authorized by a DEBTOR, check here and pre-</li> </ol>	HIS AMENDMENT: Prioriting		b) (name of Assignor, it	f this is an Assignmen	ıt)
9a. ORGANIZATION'S NAME	orac hame of authorizing	DODIO			
FANNIE MAE					
9b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITIONAL NA	ME(S)/INITIAL(S)	SUFFIX
Hunt Mortgage Release for filing with Douglas County	NV				

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS	
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form #2015-874640 filed on 12/30/2015	
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form	\ \
12a. ORGANIZATION'S NAME FANNIE MAE	
OR 12b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexione Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's res	
13a. ORGANIZATION'S NAME MEADOW BROOK ASSOCIATES, LP	
OR 13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):	
covers timber to be cut covers as-extracted collateral is filed as a fixture filing  16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):  Address:	on of real estate: 818-22-002-103 : 134 Kahle Dr., Stateline, NV 89449 ibit A attached hereto for Legal Description.
18. MISCELLANEOUS:	

## EXHIBIT A

Real property in the unincorporated area of the County of Douglas, State of Nevada, described as follows:

PARCEL 1 AS SHOWN ON THE PARCEL MAP (LDA 03-0888) FOR MEADOW BROOK ASSOCIATES, L.P., FILED IN THE OFFICE OF THE DOUGLAS COUNTY RECORDER ON NOVEMBER 12, 2004 IN BOOK 1104, PAGE 5494 AS DOCUMENT NO. 629016.

