APN:122009310017

10. OPTIONAL FILER REFERENCE DATA:

TERM

2203089182

DOUGLAS COUNTY, NV Rec:\$62.00

2024-1005195

03/01/2024 09:33 AM

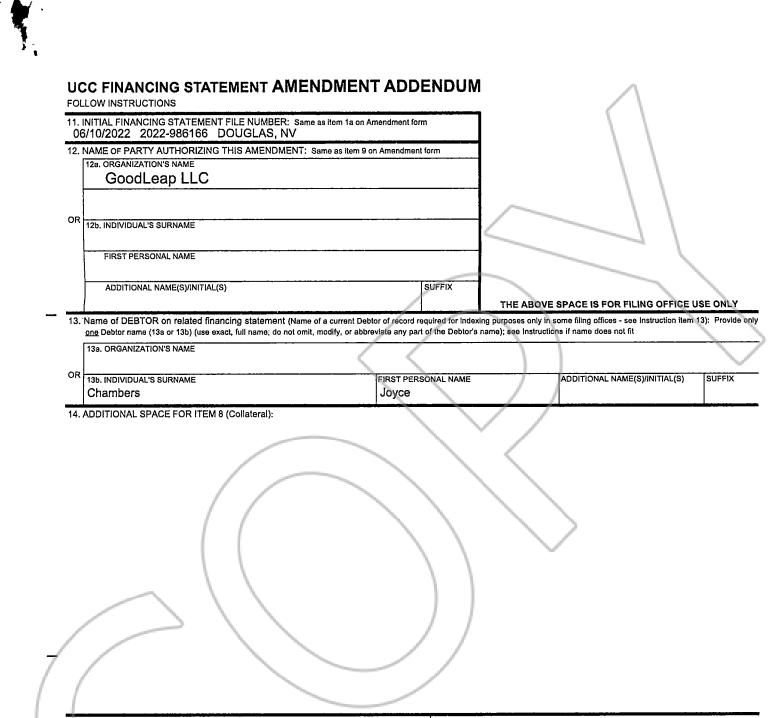
Total:\$62.00 GOODLEEP LLC

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UCC FINANCING STATEMENT AMENDMENT	г	001782	362024100519500200	20	
FOLLOW INSTRUCTIONS		SHAWNYNE GARREN, RECORDER			
A. NAME & PHONE OF CONTACT AT FILER (optional)			\ \		
B. E-MAIL CONTACT AT FILER (optional)			\ \		
filings@goodleapsupport.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)			\ \		
Control of the contro	$\neg 1$		\ \		
GoodLeap LLC			\	\	
PO Box # 981440				\	
El Paso, TX 79998- 1440	, 1			1	
<u> </u>		THE ABOVE SPACE	E IS FOR FILING OFFICE	E USE ONLY	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 06/10/2022 2022-986163 DOJGLAS, INV	_	This FINANCING STATEM (or recorded) in the REAL	ENT AMENDMENT is to be f	led [for record]	item 13
2. TERMINATION: Effectiveness of the Financing Statement identified above Statement	is terminated with res	pect to the security interes	t(s) of Secured Party authoriz	ing this Terminati	ion
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b For partial assignment, complete Items 7 and 9 and also indicate affected co		ee in item 7c <u>and</u> name of	Assignor in item 9		
4. CONTINUATION: Effectiveness of the Financing Statement identified abord continued for the additional period provided by applicable law	ove with respect to the	security interest(s) of Secu	red Party authorizing this Co	ntinuation Statem	ient is
5. PARTY INFORMATION CHANGE:					
CHANG	of these three boxes to: GE name and/or address:	CompleteADD name		name: Give recor	
This Change affects Debtor or Secured Party of record Item 6a 6. CURRENT RECORD INFORMATION: Complete for Party Information Change	or 6b; <u>and</u> item 7a or 7b		and item 7cto be de	leted in item 6a or 6	6b
6a. ORGANIZATION'S NAME	g goving only <u>or o</u> nam	V (00 0) (0)			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	17	ADDITIONAL NAME(S)/INITi	AL(S) SUFFIX	
Chambers	Joyce	10	ADDITIONAL NAME(S)/MITO	AL(S)	`
 CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME 	on Change - provide only <u>one</u> r	ame (7a or 7b) (use exact, full nar	ne; do not omit, modify, or abbreviate	eny part of the Debtor's	a name)
OR 7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME		/			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		f		SUFFIX	x
7c. MAILING ADDRESS	CITY	·	STATE POSTAL CODE	COUNT	TRY
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD	collateral DEI	ETE collateral	ESTATE covered collateral	ASSIGN co	ollateral
Indicate collateral:					
NAME of SECURED PARTY of RECORD AUTHORIZING THIS AM If this is an Amendment authorized by a DEBTOR, check here and provide no [9a. ORGANIZATION'S NAME]	ENDMENT: Provide of authorizing Debte		ame of Assignor, if this is an A	ssignment)	
GoodLeap LLC					
ODI	FIRST PERSONAL NAM	1E	ADDITIONAL NAME(S)/INITI	AL(S) SUFFIX	X

Debtors: Joyce Chambers & Ron Wilkerson



15. This FINANCING STATEMENT AMENDMENT:	17. Description of real estate:
covers timber to be cut covers as-extracted collateral X is filed as a fixture filing	1061 Aspen Brook Ln, Gardnerville, NV, 89460
16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):	
Joyce Chambers & Ron Wilkerson	
	County DOUGLAS
	APN 122009310017
	LOT:38 SUBD:CEDAR CREEK SEC/TWN/RNG/MER:SEC 09 TWN 12N RNG 20E
18. MISCELLANEOUS:	· · · · · · · · · · · · · · · · · · ·