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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] CRYSTAL CLANCY 402-462-4128	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) T-L CREDIT COMPANY P.O. BOX 1386 HASTINGS, NE 68902	

State of Oregon, County of Klamath
 Recorded 04/15/2005 8:13 a.m.
 Vol M05 Pg 26144-45
 Linda Smith, County Clerk
 Fee \$ 26⁰⁰ # of Pgs 2
5⁰⁰ opa

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME LYNHART RANCH, LLC					
OR	1b. INDIVIDUAL'S LAST NAME				
1c. MAILING ADDRESS 35243 MALIN LOOP ROAD		CITY MALIN	STATE OR	POSTAL CODE 97632	COUNTRY USA
1d. <u>SEE INSTRUCTIONS</u> 93-1073879	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION Limited Liability C	1f. JURISDICTION OF ORGANIZATION OREGON	1g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> NONE	

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME				
2c. MAILING ADDRESS 35243 MALIN LOOP ROAD		CITY MALIN	STATE OR	POSTAL CODE 97632	COUNTRY USA
2d. <u>SEE INSTRUCTIONS</u> 555-68-5213	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE	

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME T-L CREDIT COMPANY, A DIVISION OF T-L IRRIGATION COMPANY					
OR	3b. INDIVIDUAL'S LAST NAME				
3c. MAILING ADDRESS P.O. BOX 1386		CITY HASTINGS	STATE NE	POSTAL CODE 68902	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

1 - 765P 8 TOWER T-L IRRIGATION SYSTEM INCLUDING 1 - 15HP, 3PH, 460V ELECTRIC MOTOR AND PANEL AND ALL OTHER ACCESSORIES S/N 22326; 1370' - #4-4-0-0 WIRE; 630' - #2 WIRE

KLAMATH COUNTY, OREGON

LOAN #1657

5. ALTERNATIVE DESIGNATION (if applicable)	<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BLYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional)		<input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2			

8. OPTIONAL FILER REFERENCE DATA
LYNHART RANCH, LLC BY: X HAROLD HARTMAN TITLE: X owner HAROLD HARTMAN: X Harold Hartman
 FILING OFFICE COPY — UCC FINANCING STATEMENT (FORM UCC1) (REV. 05/22/02) International Association of Commercial Administrators (IACA)

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5 opa

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME

OR

LYNHART RANCH, LLC

9b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11d. SEE INSTRUCTIONS

ADD'L INFO RE
ORGANIZATION
DEBTOR

11e. TYPE OF ORGANIZATION

11f. JURISDICTION OF ORGANIZATION

11g. ORGANIZATIONAL ID #, if any

☐ NONE12. ☐ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME

OR

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

12c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

13. This FINANCING STATEMENT covers ☐ timber to be cut or ☐ as-extracted collateral, or is filed as a ☒ fixture filing.

14. Description of real estate:

N 1/2 SE 1/2, SECTION 2 - T41S - R12E AND N 1/2
SW 1/4, SECTION 1 - T41S - R12E
KLAMATH COUNTY, OREGON

16. Additional collateral description:

15. Name and address of a RECORD OWNER of above-described real estate
(if Debtor does not have a record interest):

HAROLD HARTMAN

KLAMATH COUNTY, OR

LOAN #1657

17. Check only if applicable and check only one box.Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate18. Check only if applicable and check only one box.☐ Debtor is a TRANSMITTING UTILITY☐ Filed in connection with a Manufactured-Home Transaction — effective 30 years☐ Filed in connection with a Public-Finance Transaction — effective 30 years