

M05-65534

Klamath County, Oregon

09/30/2005 03:41:44 PM

Pages 6 Fee: \$46.00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Umpqua Bank Loan Support Services 250 NE Garden Valley Blvd, Suite 12/ PO Box 1580 Roseburg, OR 97470	

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 CAVE INCOME PROPERTIES, L.L.C.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS PO BOX 40051		CITY EUGENE	STATE OR	POSTAL CODE 97404-0004
1d. <u>SEE INSTRUCTIONS</u>		ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION LLC	1f. JURISDICTION OF ORGANIZATION OR
			1g. ORGANIZATIONAL ID #, if any 666387-85	<input 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		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY
2d. <u>SEE INSTRUCTIONS</u>		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 Umpqua Bank				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS C/O Loan Support Services, PO Box 1580		CITY Roseburg	STATE OR	POSTAL CODE 97470
				COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

- DEFINITIONS.** As used in this Collateral description, the following words have the meanings stated below:
 - Grantor and Debtor.** The word "Grantor" also includes the Debtor named in any related UCC Financing Statement.
 - Real Property.** The term "Real Property" means the property at 2560 Campus Drive, Klamath Falls, OR 97601 more particularly described below, including all of Grantor's rights of ingress and egress to the Real Property: See attached Exhibit "A".
 - Improvements.** The word "Improvements" means all buildings, structures, fixtures and other improvements of every kind and nature now or hereafter located on or about the Real Property.
 - Premises.** The word "Premises" means the Real Property and the Improvements.
- PERSONAL PROPERTY.** All personal property, except personal property owned by tenants occupying

(Continued on attached Financing Statement Addendum)

5. ALTERNATIVE DESIGNATION (if applicable):		LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum		7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional)		All Debtors		Debtor 1	Debtor 2
8. OPTIONAL FILER REFERENCE DATA 68695835							

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 CAVE INCOME PROPERTIES, L.L.C.			
OR	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	
					<input type="checkbox"/> NONE

12. ☐ 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:

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

16. Additional collateral description:

the improvements, and all fixtures of every kind and nature now owned and/or hereafter acquired and situated upon and/or used in connection with the operation, ownership, use or enjoyment of the Premises including, without limitation, the following:

2.1 All accounts, chattel paper, contracts for sale, deposit accounts, documents, documents of title, contract rights, general intangibles, payment intangibles, letters of credit, goods, instruments and assumed business names of Grantor relating to the Premises;

2.2 All equipment, inventory, furnishings, appliances, machinery, tools, building materials, supplies, maintenance or service equipment and other raw materials or supplies, component parts and work in progress relating to the Premises;

2.3 All warranties, licenses, franchises, plats, as-built

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 Estate

18. 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

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CITY

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COUNTRY

11d. **SEE INSTRUCTIONS**

ADD'L INFO RE
ORGANIZATION
DEBTOR

11e. TYPE OF ORGANIZATION

11f. JURISDICTION OF ORGANIZATION

11g. ORGANIZATIONAL ID #, if any

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

14. Description of real estate:

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

16. Additional collateral description:

plans, approvals, permits, drawings, specifications and construction contracts relating to the Premises or Grantor's business operations on the Premises;

2.4 All commercial tort claims with respect to the Premises and other legal and equitable claims, judgments and awards now or hereafter accruing to the benefit of Grantor and/or the Premises;

2.5 All bonding, construction, development, financing, guaranty, indemnity, maintenance, management, service, supply and warranty agreements, commitments, contracts, subcontracts, reports, studies, agreements; insurance policies and bonds relating to the Premises;

2.6 All deposits, reserves, prepayments, deferred payments, rebates, refunds and returns of money or property paid to or deposited with any governmental body, agency or authority, any public or private utility, district or

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16. Additional collateral description:

company, insurance companies, or any other person in connection with the Premises.

3. INCOME FROM OPERATIONS. All leases, rental agreements, income, room rates, revenues, rents, issues, profits, accounts, accounts receivable, security deposits, rent deposits, general intangibles, contract rights or any other revenues related to the Premises or generated from operations conducted on the Premises, whether now or hereafter existing and whether characterized as being derived from real or personal property, including, without limitation, income from inventory sales, tenant or guest occupancy of the Premises, personal services, amenities, concessions, vendors, food and bar services.; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions

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16. Additional collateral description:

relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds).

17. Check only if applicable and check only one box.

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Exhibit "A" attached to that said LINE OF CREDIT INSTRUMENT, ASSIGNMENT OF RENTS, HAZARDOUS SUBSTANCES CERTIFICATE AND INDEMNITY AGREEMENT, NOTICE OF INSURANCE REQUIREMENTS and UCC FINANCINT STATEMENT, SECURITY AGREEMENT dated September 16, 2005.

Lots 3, 4 and 5 in Block 1, Replat No. 1 of a portion of Sunnyside Addition to the City of Klamath Falls, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

Aoyama Holdings, Inc.

By:

Douglas D. Mortimore, President

Date: September 16, 2005

Cave Income Properties, Inc.

By:

Douglas D. Mortimore, President