To determine address and the post of the foregoing is any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and account pages). CITY	UCC FINANCING STATEMENT FOLLOWINSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address)		2008-004978 Klamath County 00043698200800 04/04/2008 11:28:20	7, Oregon]]]]]] 9 Fe
HARDOVICION, LLC The MICHARD ADDRESS 15. MICHARD ADDRESS 16. MICHARD	PO BOX 1580 Roseburg, OR 97470	Tine (1a or 1b) - do not abbreviate or combine	IE ABOVE SPACE IS FO	OR FILING OFFICE	USE ONLY
TO INDIVIDUALS LAST NAME FIRST NAME	Harborview, LLC				
11. SECURED PARTY'S MAME (or hame of TOTAL ASSIGNEE of ASSIGNOR SIP) - insert only one secured party name (2a or 3b) 2. SECURED PARTY'S MAME (or hame of TOTAL ASSIGNEE of ASSIGNOR SIP) - insert only one secured party name (2a or 3b) 3. SECURED PARTY'S MAME ADDILINFO RE 2a TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID 8, if any 2 country of the foregoing is owned now or acquired later; all accessions, addition for proposed in the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and account of the foregoing is owned now or acquired later; all accessions, addition foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and account open controlled in the foregoing in the foregoing (including insurance, general intangibles and account open controlled in the foregoing in the f	1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	VAME	SUFFI
ADDITIONAL DEBTOR 16. TYPE OF ORGANIZATION 11. JURISDICTION OF ORGANIZATION 12. CREANIZATION 15. CREANIZATION LLC OR 28.2894-94 2. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - Insent only gine debtor name (2s or 2s) - do not abbreviate or combine names 2. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - Insent only gine debtor name (2s or 2s) - do not abbreviate or combine names 2. MAILING ADDRESS CITY 2. MAILING ADDRESS CITY 3. SECURED PARTLYS NAME (or NAME or TOTAL ASSIGNEE OF ASSIGNOR S.PT) - Insent only gine secured party name (3s or 3b) CITY 3. SECURED PARTLYS NAME (or NAME or TOTAL ASSIGNEE OF ASSIGNOR S.PT) - Insent only gine secured party name (3s or 3b) CITY 3. SECURED PARTLYS NAME (or NAME or TOTAL ASSIGNEE OF ASSIGNOR S.PT) - Insent only gine secured party name (3s or 3b) CITY 4. This FINANCING STATEMENT covers the following collaters: ALI FIXTURES; whether any of the foregoing is owned now or acquired later; all accessions, addition replacements, and substitutions 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 account proceeds). 3. ALTERNATIVE DESIGNATION IT applicable): LESSEELESSOR CONSIGNEE CONSIGNOR BALLEEBALLOR BELLERBALUR		CITY	STATE	Trooper a second	
2. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names 2. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names OR 2b. INDIVIDUAL'S LAST NAME PIRST NAME			OR		US
DR 22. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX	ORGANIZATION LLC	OR	1.9.0.0.		ny
4. This FINANCING STATEMENT covers the following collateral: All Fixtures; whether any of the foregoing is owned now or acquired later; all accessions, addition replacements, and substitutions 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 account proceeds). 5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG, LIEN NON-UCC FILE SETATE RECORDS. Attach Addendum [if applicable] [ORGANIZATION DEBTOR 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGN DEBTOR 3a. ORGANIZATION'S NAME Umpqua Bank OR 3b. INDIVIDUAL'S LAST NAME 3c. MAILING ADDRESS	NOR SIP) - insert only one secured party na	me (3a or 3b)		
All Fixtures; whether any of the foregoing is owned now or acquired later; all accessions, addition replacements, and substitutions 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 account proceeds). 5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILLE/BAILOR SELLER/BUYER AG LIEN NON-UCC FILE (If applicable): 17. Check to Record (or recorded) in the REAL (If applicable): 17. Check to Record (or recorded) and the popular to proceed (applicable): 18. OPTIONAL FILER REFERENCE DATA All Fixed Proceed Proceeding Proceed	C/O Loan Support Services, PO Box 1580				COUNTR
8. OPTIONAL FILER REFERENCE DATA OPTIONAL FILER REFERENCE DATA Attach Addendum If applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) ADDITIONAL FEE Optional All Debtors Optional	foregoing; all proceeds relating to any of the fiproceeds). 5. ALTERNATIVE DESIGNATION OF ADDITIONAL ACCURATION OF ACCURATION O	oregoing (including insu	rance, general ir	nd relating to	any of t
	LITIS FINANCING STATEMENT is to be filed (for record) (or recorded) in the RE- IF application of the RE- B. OPTIONAL FILER REFERENCE DATA	AL 7. Check to REQUEST SEARCH Fability (ADDITIONAL FEE)	OR SELLER/BUYER REPORT(S) on Debtor(S) foptional		NON-UCC FILL

CC FINANCING STATEMENT ADDENDUM DLLOW INSTRUCTIONS (front and back) CAREFULLY						
NAME OF FIRST DEBTOR (1a or 1	TEMENT					
Harborview, LLC						
9b. INDIVIDUAL'S LAST NAME FIRST NAME		MIDDLE NAME, SUFFIX				
MISCELLANEOUS:						
		요한 시간되는 경시에 밝혔다				
					y in the	
<u> </u>			HE ABOVE SPACE	IS FOR FILING OFFI	CE USE ONLY	
ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only one	name (11a or 11b) - do not abbreviate or	combine names			
11a. ORGANIZATION'S NAME						
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX	
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY	
d. SEE INSTRUCTIONS ADD'L INFO I ORGANIZATI	RE 11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATI	ON 111g. ORG	SANIZATIONAL ID#, if a	ny	
DEBTOR					П _N	
ADDITIONAL SECURED PAR	TY'S or ASSIGNOR S/P'S	NAME - insert only one name (12a or	12b)			
12a. ORGANIZATION'S NAME					·	
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX	
MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY	
This FINANCING STATEMENT covers	timber to be cut or as-extracted	16. Additional colleteral description:				
collateral, or is filed as a fixture filing.						
. Description of real estate:						
ots 1 through 46 of TR						
IEW, according to the of						
le in the office of the	County Clerk of					
lamath County, Oregon.						
					- N	
Name and address of a RECORD OWNER	of above-described real estate (if					
Debtor does not have a record interest):						
		17. Check only if applicable and check	only one boy			
				erty held in trust or	Decedent's Esta	
		Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Esta 18. Check only if applicable and check only one box.				
		事業 한 한 장면 되면 하면 사람들은 경우 사람들이 되었다. 그는 이 얼마나 그는 것은 사람들이 모르는 그 그리고 있다.				
		Debtor is a TRANSMITTING UTILITY				
		Filed in connection with a Manufactu	red-Home Transaction -			