ZU10-011193 Klamath County, Oregon

STATE

NE

POSTAL CODE

68154

COUNTRY

USA

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00090555201000111930020025

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY				09/21/2010 09:56:53 AM			Fee: \$42.00	
A. I	NAME & PHONE OF CO	ONTACT AT FILE	R [optional]		·			
В. :	DIVERSIFIEI 14010 FNB PA	O FINANCIA ARKWAY, 4	L SERVICES, LLC					
1. [DEBTOR'S EXACT FU	JLL LEGAL NAMI	E - insert only one debtor name (1a or	THE ABOV	/E SPACE IS FO	OR FILING OFFICE U	SE ONLY	
	18. ORGANIZATION'S NA BALIN FARM T	ME					***************************************	
OR	16. INDIVIDUAL'S LAST N	IAME		FIRST NAME	MIDDLE	NAME	SUFFIX	
1c. l	I MAILING ADDRESS			СПУ	STATE	POSTAL CODE	COUNTRY	
136	600 HOMEDALE	RD.		KLAMATH FALLS	OR	97603	USA	
1d. '	TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	16. TYPE OF ORGANIZATION REVOCABLE TRUST	1f. JURISDICTION OF ORGANIZATION OREGON	1g. ORG 13482	ANIZATIONAL ID#, if any 23-85	4	
2. /			LEGAL NAME - insert only one det	otor name (2a or 2b) - do not abbreviate or co	ombine names			
	2a. ORGANIZATION'S NA BALIN RANCHI							
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME			
2c.	MAILING ADDRESS			СПУ	STATE	POSTAL CODE	COUNTRY	
		KLAMATH FALLS	OR	97603	USA			
2d.	TAX ID#: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	26. TYPE OF ORGANIZATION UNINCORPORATED	21. JURISDICTION OF ORGANIZATION OREGON	2g. ORG	IANIZATIONAL ID#, if any	y None	
3. 8	SECURED PARTY'S	NAME (or NAME of	of TOTAL ASSIGNEE of ASSIGNOR S	S/P) - insert only <u>one</u> secured party name (3a	or 3b)			
	3a. ORGANIZATION'S NA	ME						
OR			SERVICES, LLC				ISUFFIX	
3b. INDIVIDUAL'S LAST NAME		4AME		FIRST NAME	MIDDLE	MIDDLE NAME		

4. This FINANCING STATEMENT covers the following collateral:

14010 FNB PARKWAY, 400

3c. MAILING ADDRESS

1-NEW 2010 MODEL 8000 VALLEY PIVOT 1190' 6T W/287' PRECISION CORNER ARM
1-3 WHEEL BASE BEAM W/14.9X24" TIRES, 5-3 WHEEL BASE BEAMS, 18-15' BOOMBACKS
680' 10" PVC, 1430' 4 #2 AL W/2 #12 CU IN PVC, 180' 24X20 16 GA CMP, MISC. VALVES & FITTINGS

CITY

OMAHA

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE		R BAILEE/BAILOR SELE	LER/BUYER AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed [for record] ESTATE RECORDS. Attach Addendum	(or recorded) in the REAL 7. Check to lif applicable 1 (ADDITIO	REQUEST SEARCH REPORT(S) on NAL FEE! (optional		Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA				
#0130079-002 J.W. KERNS				

		N RELATED FINANCING STA	TEME	NT					
9a, ORGANIZATION'S NAM BALIN FARM TE									
96. INDIVIDUAL'S LAST NA		FIRST NAME		MIDDLE NAME, SUFFIX					
	,								
MISCELLANEOUS:		1							
				:					
							IS FOR FILING OFFICE	USE OI	NLY
. ADDITIONAL DEBTOR		_ LEGAL NAME - Insert only one	name (*	1a or 11b) - do not abbrev	riate or combine nam	es			
11b. INDIVIDUAL'S LAST N	AME		FIRS	TNAME		MIDDLE	NAME	SUFF	ΊΧ
. MAILING ADDRESS		-	СП	,		STATE	POSTAL CODE	COU	NTRY
. TAX ID #: SSN OR EIN	ORGANIZATION	11e. TYPE OF ORGANIZATION	11f.	JURISDICTION OF ORGA	NIZATION	11g. ORG	J GANIZATIONAL ID#, if any		П
ADDITIONAL SECTION	DEBTOR	e T accionod sidi	E NIAI	ME - insert only <u>one</u> name	(40 40b)				NON
ADDITIONAL SECU 12a. ORGANIZATION'S NA		S or [] ASSIGNOR S/F	5 NAI	VIE: - Insert only one name	(128 or 12b)				
12b. INDIVIDUAL'S LAST N	IAME		FIRS	FIRST NAME		MIDDLE NAME		SUFFIX	
c. MAILING ADDRESS			cm	СПҮ		STATE POSTAL CODE		COUNTRY	
This FINANCING STATEMI collateral, or is filed as a Description of real estate: S 1/2 OF NE 1/4 S KLAMATH COUL	fixture filing.	iber to be cut or as-extracted	16.	Additional collateral descri	iption:			•	
Name and address of a RE (if Debtor does not have a r		above-described real estate							
BALIN FARM TR	IST			O. A. D. W					
DIMINITALIN			Deb	Check <u>only</u> if applicable at tor is a Trust or Check <u>only</u> if applicable at	Trustee acting with	respect to p	property held in trust or	Deceder	ıt's Esta
			_	Debtor is a TRANSMITTIN	GUTILITY				
				Filed in connection with a	Manufactured-Home	Transaction	n — effective 30 years		