UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY 04/26/2013 09:15:28 AM Fee: \$42.00 A. NAME & PHONE OF CONTACT AT FILER [optional] Phone: (800) 331-3282 Fax: (818) 662-4141 B. SEND ACKNOWLEDGEMENT TO: (Name and Address) 14413 UMPQUA BANK CT Lien Solutions 37854085 P.O. Box 29071 OROR Glendale, CA 91209-9071 **FIXTURE** File with: CC OR Klamath, OR 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 ÓR 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX Hill April 1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 4400 Barry Drive Klamath Falls OR 97603 USA 1d. SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION DEBTOR 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. SEE INSTRUCTIONS ADD'L INFO RE 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any ORGANIZATION 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

2013-004437

Klamath County, Oregon

MIDDLE NAME

STATE

OR

POSTAL CODE

97470

4. This FINANCING STATEMENT covers the following collateral:

3b. INDIVIDUAL'S LAST NAME

3c. MAILING ADDRESS

PO Box 1820

OR

This filing is not to perfect a security interest or lien on the described real property. It is a "Non-UCC Filing" to simply facilitate notice to Umpqua Bank in the event the real property is sold or otherwise transferred. LEGAL DESCRIPTION The Northeasterly 10 feet of Lot 3 and the Southwesterly 55 feet of Lot 4. Block 2, FIRST ADDITION TO TONATEE HOMES, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

FIRST NAME

Roseburg

CITY

5. ALTERNATIVE DESIGNATION [if applicable]	LESSEE/LESSOR CONSIGNEE/CONSIGN	OR BAILEE/BAILOR SELLER/	BUYER AG. LIEN NON-UCC FILING
This FINANCING STATEMENT is to be filed ESTATE RECORDS. Attach Addendum.		to REQUEST SEARCH REPORT(S) on Debte TIONAL FEE) [optional]	or(s) All Debtors Debtor 1 Debtor 2
B. OPTIONAL FILER REFERENCE DATA			
37854085	69030202	HUB	

SUFFIX

COUNTRY

USA

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FINANCING STATEM OLLOW INSTRUCTIONS (front and b	oack) CAREFULLY				
NAME OF FIRST DEBTOR (1a or 1)	b) ON RELATED FINANCING STATEM	MENT			
R					
95. INDIVIDUAL'S LAST NAME Hill	FIRST NAME April	MIDDLE NAME,SUFFIX			
0. MISCELLANEOUS					
7854085-OR-35					
4413 UMPQUA BANK					
ile with: CC OR Klamath, ORHI	JB 6903	30202	THE ABOVE SPACE IS FO	R FILING OFFICE USE	ONLY
	FULL LEGAL NAME - insert only o <u>ne r</u>	name (11a or 11b) - do not ab	breviate or combine names		
11a. ORGANIZATION'S NAME					
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
1d. <u>SEE INSTRUCTION</u> ADD'L INF ORGANIZ DEBTOR		11f. JURISDICTION OF ORG	ANIZATION 11g. OF	RGANIZATIONAL ID#, i	f any
2. ADDITIONAL SECURED PA	RTY'S QL ASSIGNOR S/P's N	NAME - insert only one name	(12a or 12b)		
.D			LAMPRI F	THANK T	SUFFIX
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
This FINANCING STATEMENT covers collateral or is filed as a fixture f	timber to be cut or as-extracted	16. Additional collateral desc	cription:		
4. Description of real estate:					
or lien on the described real ; Filing; to simply facilitate not event the real property is sold LEGAL DESCRIPTION The and the Southwesterly 55 fee	ice to Umpqua Bank in the d or otherwise transferred. Northeasterly 10 feet of Lot 3 et of Lot 4, Block 2, FIRST DMES, according to the officia				
15. Name and address of a RECORD OWN (if Debtor does not have a record inter					
		17. Check only if applicable and Debtor is a Trust or	and check <u>only</u> one box. Trustee acting with respect to pro	perty held in trust or	Decedent's Est
		18. Check only if applicable	-		<u> </u>
			<del></del>		
		Debtor is a TRANSMITT	TING UTILITY		
			FING UTILITY  a Manufactured-Home Transactic	on	