

2016-000028 Klamath County, Oregon

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01/05/2016 08:41:26 AM

Fee: \$52.00

## **UCC FINANCING STATEMENT**

2-60X135 FLEX LED DISPLAY SIGN

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141

FOLLOW INSTRUCTIONS

B. E-MAIL CONTACT AT FILER (optional)  CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 15602 - US BANK					
	54050400				
CT Lien Solutions P.O. Box 29071	51859139				
Glendale, CA 91209-9071	OROR				
<b>2.37.11.17</b>	FIXTURE ,		-46		
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File with: Klamath, OR				R FILING OFFICE US	
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (	use exact, full name; do not omit,	modify, or abbreviate any	part of the Debtor	s name); if any part of the	Individual Debtor's
name will not fit in line 1b, leave all of item 1 blank, check here	and provide the Individual Debto	r information in item 10 o	f the Financing Stat	ement Addendum (Form t	JCC1Ad)
1a. ORGANIZATION'S NAME EVERCLEAN SOFTCLOTH CARWASH, LLC					
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	FIRST PERSONAL NAME		AL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	10. 10.	STATE	POSTAL CODE	COUNTRY
1901 S SIXTH ST	KLAMATH F	ALLS	OR	97601	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (	use exact, full name; do not omit,	modify, or abbreviate any	part of the Debtor	s name); if any part of the	Individual Debtor's
name will not fit in line 2b, leave all of item 2 blank, check here	and provide the Individual Debto	r information in item 10 o	f the Financing Sta	tement Addendum (Form I	UCC1Ad)
2a. ORGANIZATION'S NAME		_			
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OR 2b. INDIVIDUAL'S SURNAME	FIRST FERSONAL	. NAME	ADDITION	IAL NAMĒ(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	-	STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASS	SIGNOR SECURED PARTY): Pro	vide only one Secured P	arty name (3a or 3b	)	
3a. ORGANIZATION'S NAME	0.0.1.1.6			/	
U.S. Bank Equipment Finance, a division of	U.S. Bank National Ass	ociation			
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	LNAME	ADDITION	NAL NAME(SYINITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
1310 Madrid Street	Marshall	4	MN	56258	USA
A COLLATEDAL. This for the statement severe the following coll	eteral:				

TOGETHER WITH ALL REPLACEMENTS, PARTS, REPAIRS, ADDITIONS, ACCESSIONS AND ACCESSORIES INCORPORATED THEREIN OR AFFIXED OR ATTACHED THERETO AND ANY AND ALL PROCEEDS OF THE FOREGOING, INCLUDING, WITHOUT LIMITATION, INSURANCE RECOVERIES.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	being administered by a Dec	edent's Personal Representative
6a. Check only if applicable and check only one box:	6b. Check only if applicable	and check only one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer	r Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: 51859139 3000009057	2055881	

## UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS

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do not mit, modify, or abbrivatic any part of the Debtor's name) and enter the mailing address in line 10c.    Total Control		:	THE ABOVE SPACE IS FOR FILING OFFI	CE USE ONLY
do not mit, modify, or abbrivatic any part of the Debtor's name) and enter the mailing address in line 10c.    Total Control	10 DERTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or	Debtor name that did not fit ir	line 1b or 2b of the Financing Statement (Form UCC1) (us	e exact, full name;
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10. MAILING ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)  11. □ ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)  11a. ORGANIZATIONS NAME  OR TID. INDIVIDUAL'S SURNAME.  FIRST PERSONAL NAME  ADDITIONAL SPACE FOR ITEM 4 (Colsularal):  12. ADDITIONAL SPACE FOR ITEM 4 (Colsularal):  13. □ This FINANCING STATEMENT is to be filled [for recorded] in the Real ESTATE RECORDS (if applicable) or an address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):  EVERCLEAN SOFTCLOTH CARWASH, LLC  1901 S SIXTH ST  KLAMATH FALLS, OR 97601  PLEASE SEE ATTACHED LEGAL LAND DESCRIPTION  PLEASE SEE ATTACHED LEGAL LAND DESCRIPTION	OR 10b. INDIVIDUAL'S SURNAME			
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11a. NOIVIDUAL'S SURNAME  11c. MAILING ADDRESS  CITY  STATE POSTAL CODE  COUNTRY  12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  13. This FINANCING STATEMENT is to be filled (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable)  15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):  EVERCLEAN SOFTCLOTH CARWASH, LLC  1901 S SIXTH ST  KLAMATH FALLS, OR 97601  FIRST PERSONAL NAME  ADDITIONAL NAME(SYMITIAL IS)  SUFFIX  14. This FINANCING STATEMENT:  COVERS INTEMENT:  CO	10c. MAILING ADDRESS	Lair	SIAIL TI COTAL SODE	COUNTRY
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17. MISCELLANEOUS: \$1859139-OR-35 15602 - US BANK BUSINESS EQU U.S. Bank Equipment Finance, a division File with: Klamath, OR 300009057 2055881				
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LEGAL DESCRIPTION: Real property in the County of Klamath, State of Oregon, described as follows:

A TRACT OF LAND IN THE SW 1/4 NW 1/4 OF SECTION 1, TOWNSHIP 39 SOUTH, RANGE 9 EAST OF THE WILLAMETTE MERIDIAN, KLAMATH COUNTY, OREGON, MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING AT A POINT 720 FEET EAST OF AN IRON PIN DRIVEN INTO THE GROUND AT THE SOUTHWEST CORNER OF THE NW 1/4 OF SECTION 1, TOWNSHIP 39 SOUTH, RANGE 9 EAST OF THE WILLAMETTE MERIDIAN, KLAMATH COUNTY, OREGON, THENCE NORTH 240 FEET; THENCE EAST 132 FEET; THENCE SOUTH 240 FEET; THENCE WEST 132 FEET TO THE PLACE OF BEGINNING.