2016-005835

Klamath County, Oregon

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UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional)]			
Charles T. Sharbaugh, Esq. B. E-MAIL CONTACT AT FILER (optional)				- 6.	
csharbaugh@carltonfields.com				- 1	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				- 1	
Carlton Fields				_	L.
1201 West Peachtree Street	1			→ 1	lk.
Suite 3000			s. 4	7	Th
Atlanta, GA 30309		1		1.00	
		THE 400	VE 604 65 10 50	D EU WA OFFICE WAS	ONLY
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full contents of the c	ill name: do not omit.			R FILING OFFICE USE	
				atement Addendum (Form L	
18. ORGANIZATION'S NAME SHASTA VIEWAID OPCO LLC	4		47	b .	
1b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 330 North Wabash Avenue, Suite 3700	Chicago		STATE	POSTAL CODE 60611	COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, fu	ill name; do not omit,			's name); if any part of the I atement Addendum (Form L	
2a. ORGANIZATION'S NAME					
	Th	-			
OR 2b. (NDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC	CURED PARTY): Pro	vide only one Secured I	Party name (3a or 3b	p)	
38. ORGANIZATION'S NAME KeyBank National Association				_ <u></u> - √	<u></u>
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 4910 Tiedeman Road, 3rd Floor	Brooklyn		STATE OH	POSTAL CODE 44144	COUNTRY
4. COLLATERAL: This financing statement covers the following collateral ALL ASSETS OF DEBTOR WHETHER NOW OW!	NED OR HER	EAFTER ACC	UIRED ANI	WHEREVER L	OCATED
AND ALL PRODUCTS AND PROCEEDS THEREO				,	
	la.				
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5. Check only if applicable and check only one box: Collateral is held in a Trus	st (see UCC1Ad, Item	17 and Instructions)	being administe	red by a Decedent's Person	al Representative
6a. Check only if applicable and check only one box:			_	f applicable and check only	
Public-Finance Transaction Manufactured-Home Transaction	· · · · · · · · · · · · · · · · · · ·	a Transmitting Utility		tural Lien Non-UCC	
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consign	nor Seller/B	uyer Ba	ilee/Bailor Lice	nsee/Licensor
8. OPTIONAL FILER REFERENCE DATA: KeyBank - Enlivant - Shasta Place		[]	Klamath Cou		
		1 - 4 41			-tt /IA ^ /

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a, ORGANIZATION'S NAME SHASTA VIEW AID OPCO LLC 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name: do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a, ORGANIZATION'S NAME OR 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS STATE POSTAL CODE COUNTRY 11. ADDITIONAL SECURED PARTY'S NAME of ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 1a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS STATE POSTAL CODE COUNTRY CITY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable) 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): 16. Description of real estate: See Exhibit A attached hereto and made a part hereof for a description of the Real Property.

17. MISCELLANEOUS:

KeyBank - Enlivant - Shasta Place

EXHIBIT A

<u>Legal Description</u> (SHASTA PLACE, OREGON)

Real property in the County of Klamath , State of Oregon, described as follows:

A TRACT OF LAND SITUATED IN THE N1/2 SW1/4 SE1/4 OF SECTION 28, TOWNSHIP 38 SOUTH, RANGE 9 EAST OF THE WILLAMETTE MERIDIAN, KLAMATH COUNTY, OREGON, MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING AT THE SOUTHWEST CORNER OF THE SE1/4 SE1/4 OF SAID SECTION 28; THENCE NORTH 00° 49′ 52″ EAST 333.61 FEET TO THE NORTHWEST CORNER OF THE SW1/4 SW1/4 SE1/4 SE1/4 OF SAID SECTION 28; THENCE SOUTH 89° 28′ 52″ EAST 30.00 FEET TO THE TRUE POINT OF BEGINNING OF THIS DESCRIPTION; THENCE CONTINUING SOUTH 89° 28′ 52″ EAST 301.12 FEET TO THE NORTHEAST CORNER OF SAID SW1/4 SW/4 SE1/4 SE1/4; THENCE NORTH 00° 53′ 52″ EAST 46.50 FEET TO THE NORTHWEST CORNER OF THE HIGHLAND CARE CENTER TRACT; THENCE SOUTH 89° 30′ 00″ EAST, ALONG THE NORTH LINE OF THE HIGHLAND CARE CENTER TRACT; 331.17 FEET TO THE EAST LINE OF THE SW1/4 SE1/4 OF SAID SECTION 28; THENCE NORTH 00° 57′ 53″ EAST 286.78 FEET TO THE NORTHEAST CORNER OF SAID SW1/4 SE1/4 SE1/4; THENCE NORTH 89° 27′ 44″ WEST 633.01 FEET, MORE OR LESS, TO A POINT THAT IS SOUTH 89° 27′ 44″ EAST 30.00 FEET FROM THE NORTHWEST CORNER OF SAID SW1/4 SE1/4; THENCE SOUTH 00° 49′ 52″ WEST 333.59 FEET TO THE TRUE POINT OF BEGINNING, WITH BEARINGS BASED ON THE SOUTH LINE OF SAID SECTION 28 AS BEING SOUTH 89° 30′ 00″ EAST.