AmeriTitle MTC 27 11 90 AM			2019-00 Klamath C 03/15/2019 03 Fee: \$92.00	ounty, Orego
JCC FINANCING STATEMENT				
FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional)	·····			
B. E-MAIL CONTACT AT FILER (optional)				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
Umpqua Bank PO Box 1580				
Roseburg, OR 97470			FILING OFFICE USE (או א
1a. ORGANIZATION'S NAME H & T Organics LLC 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONA	L NAME(S)/INITIAL(S)	SUFFIX
c. MAILING ADDRESS	CITY	STATE P	POSTAL CODE	COUNTRY
P.O. Box 148	Malin	OR	97632	USA
	ide the Individual Debtor information in item 1	0 of the Financing State	ment Addendum (Form UC	CC1Ad)
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME c. MAILING ADDRESS	FIRST PERSONAL NAME		POSTAL CODE	
R 2b. INDIVIDUAL'S SURNAME c. MAILING ADDRESS . SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S	СІТУ	STATE		COUNTRY
R 2b. INDIVIDUAL'S SURNAME c. MAILING ADDRESS SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S 3a. ORGANIZATION'S NAME	СІТУ	STATE		
R 2b. INDIVIDUAL'S SURNAME 2. MAILING ADDRESS SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S 3a. ORGANIZATION'S NAME Umpqua Bank	СІТУ	STATE F		
R 2b. INDIVIDUAL'S SURNAME c. MAILING ADDRESS . SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S 39. ORGANIZATION'S NAME	CITY CITY ECURED PARTY): Provide only one Secured	Party name (3a or 3b)	POSTAL CODE	USA

All Fixtures; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing.

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 Decedent'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/Buy	/er Bailee/Ballor Licensee/Licensor		
8. OPTIONAL FILER REFERENCE DATA:			
748011076			

FILING OFFICE COPY --- UCC FINANCING STATEMENT (Form UCC1) (Rev. 04/20/11)

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

	9a. ORGANIZATION'S NAME H & T Organics LLC						
२	9b. INDIVIDUAL'S SURNAME						
	FIRST PERSONAL NAME						
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX				
			1	THE ABOVI	E SPACE I	S FOR FILING OFFICE	USE ONLY
2	10a. ORGANIZATION'S NAME		in line 10c				
R	10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME						
R	10b. INDIVIDUAL'S SURNAME						SUFFIX
	10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME	CITY			STATE	POSTAL CODE	
c.	10b, INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS	CITY ASSIGNOR SECUR		NAME: Provide			
c.	10b, INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS			NAME: Provide			
1.	10b, INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS		ED PARTY'S	NAME: Provide	only <u>one</u> na		SUFFIX COUNTR SUFFIX

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. \fbox This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (If applicable)	14. This FINANCING STATEMENT:	
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: Exhibit "A".	

17, MISCELLANEOUS:

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Finastra 1320 SW Broadway, Suite 100, Portland, OR 97201-3411

EXHIBIT "A" LEGAL DESCRIPTION

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Parcel 1 of Land Partition 16-14 situated in the N 1/2 SW 1/4 of Section 1, Township 41 South, Range 10 East of the Willamette Meridian, Klamath County, Oregon, recorded September 18, 2014 in 2014-009711, Records of Klamath County, Oregon.