

2019-002542

Klamath County, Oregon

03/20/2019 11:34:01 AM

Fee: \$107.00

UCC 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				
	THE ABOVE SPA	CE IS FO	R FILING OFFICE USE	DNLY
	name; do not omit, modify, or abbreviate any part of the individual Debtor information in item 10 of the Fir			
1a. ORGANIZATION'S NAME SOS Family, LLC				
OR 16, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 406 W. 8th Street	Alturas	CA	POSTAL CODE 96101	COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full n			1	
	he Individual Debtor Information in item 10 of the Fir			
OR 26, INDIVIDUAL'S SURNAME	FIRST PERSONAL 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 SECUR 3a, ORGANIZATION'S NAME	RED PARTY): Provide only one Secured Party name	e (3a or 3b)	
Umpqua Bank				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	arr	STATE	POSTAL CODE	COUNTRY
C/O Loan Support Services, P O Box 1580	Roseburg	OR	97470	USA
 DEFINITIONS. As used in this Collateral des Grantor and Debtor. The word "Grantor" a Statement. Real Property. The term "Real Property" m more particularly described below, including all of See attached Exhibit "A" Improvements. The word "Improvement improvements of every kind and nature now or he 1.4 Premises. The word "Premises" means the 	eans the property at 1301 Esp of Grantor's rights of ingress a nts" means all buildings, a preafter located on or about the	ed in a lanade and eg structu e Real	ny related UCC in the control of the control of the Real in the Real in the control of the contr	Financing OR 97601 Property:
(Continued on attached Financing Statement Addendum)				
5. Check only if applicable and check only one box: Collateral isheld in a Trust (s			red by a Decedent's Persons	
6a. Check only if applicable and check only one box:		-	f applicable and check only o	
Public-Finance Transaction Manufactured-Home Transaction 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor C	A Debtor is a Transmitting Utility Consignee/Consignor Seller/Buyer		ural Lien Non-UCC	Filing see/Licensor
8. OPTIONAL FILER REFERENCE DATA: 748000726	adiatiza Agricola adiatiza Agr		LIOSII	503/LIVE(18UI

UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS 9. 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 SOS Family, 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 (10s or 10b) only ong 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 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11. ADDITIONAL SECURED PARTY'S NAME OF ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME OR 116. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): PERSONAL PROPERTY. All personal property, except personal property owned by tenants occupying the Improvements, and all fixtures of every kind and nature now owned and/or hereafter acquired and situated upon and/or used in connection with the operation, ownership, use or enjoyment of the Premises including, without All accounts, chattel paper, contracts for sale, deposit accounts, documents, documents of title, contract rights, general intangibles, payment intangibles, letters of credit, goods, instruments and assumed business names of Grantor relating to the Premises: 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 18 16. Description of real estate: (if Debtor does not have a record interest):

17. MISCELLANEOUS:

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS 9. 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 98. ORGANIZATION'S NAME SOS Family, LLC 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 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 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 or ASSIGNOR SECURED PARTY'S NAME; Provide only one name (11s or 11b) 11a. ORGANIZATION'S NAME 11b, INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): All equipment, inventory, furnishings, appliances, machinery, tools, building materials, supplies, maintenance or service equipment and other raw materials or supplies, component parts and work in progress relating to the Premises: All warranties, licenses, franchises, plats, as-built plans, approvals, permits, drawings, specifications and construction contracts relating to the Premises or Grantor's business operations on the Premises; All commercial tort claims with respect to the Premises and other legal and equitable claims, judgments and awards now or hereafter accruing to the benefit of Grantor and/or the Premises; 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 16. Description of real estate: (if Debtor does not have a record interest): 17, MISCELLANEOUS:

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UCC FINANCING STATEMENT ADDENDUM

pro any no	DITIONAL SPACE FOR ITEM 4 (Collateral): offits, accounts, accounts receivable, security y other revenues related to the Premises or q w or hereafter existing and whether characte hout limitation, income from inventory sales	generated rized as b	from ope	erations con ved from rea	ducted of pe	l on the Premise ersonal property.	s, whethe
12. AD	DITIONAL SPACE FOR ITEM 4 (Collateral):						
110. M	AILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
	b. INDIVIDUAL'S SURNAME	FIRST PERS	ONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
11.	ADDITIONAL SECURED PARTY'S NAME OF ASSIGN ASSIGNATION'S NAME	OR SECUR	ED PARTY	S NAME: Provide	only <u>one</u> na	me (11a or 11b)	
10c. M.	AILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
-	INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S)		***************************************	- Artika Artika da katika			SUFFIX
	INDIVIDUAL'S FIRST PERSONAL NAME					· · · · · · · · · · · · · · · · · · ·	
OR 10	b, INDIVIDUAL'S SURNAME						
do	not omit, modify, or abbreviate any part of the Debtor's name) and enter the B. ORGANIZATION'S NAME	mailing address	in line 10c				
10. DE	EBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name	or Debtor name t	that did not fit in			S FOR FILING OFFICE	
-	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX				
96	. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME						
OR -							
'	SOS Family, LLC						

File No.: 208036AM

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EXHIBIT "A" LEGAL DESCRIPTION

PARCEL 1:

Lots 1 and 2 in Block 4 of SECOND HOT SPRINGS ADDITION to the City of Klamath Falls, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon. SAVING AND EXCEPT that portion described as follows:

Beginning at a point of the Southeasterly boundary of Lot 2 in Block 4 of SECOND HOT SPRINGS ADDITION to the City of Klamath Falls, which point is 143.0 feet Northeasterly from the most Southerly corner of said Lot 2; thence Northwesterly along a line parallel to Pine Street, 32.0 feet, more or less, to the Southeasterly boundary of the U.S.R.S. main canal; thence Northeasterly along the Southeasterly boundary of said canal, 112.5 feet, more or less, to the Northeasterly corner of said Lot 2; thence Southeasterly along the Southeasterly line of said Lot 2, 107 feet, more or less, to the point of beginning.

PARCEL 2:

Beginning at a point of the Southeasterly boundary of Lot 2 in Block 4 of SECOND HOT SPRINGS ADDITION to the City of Klamath Falls, which point is 143.0 feet Northeasterly from the most Southerly corner of said Lot 2; thence Northwesterly along a line parallel to Pine Street, 32.0 feet, more or less, to the Southeasterly boundary of the U.S.R.S. main canal; thence Northeasterly along the Southeasterly boundary of said canal, 112.5 feet, more or less, to the Northeasterly corner of said Lot 2; thence Southeasterly along the Southeasterly line of said Lot 2, 107 feet, more or less, to the point of beginning.

PARCEL 3:

Lots 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15 and 16 in Block 4 SECOND HOT SPRINGS ADDTION to the City of Klamath Falls, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon

TOGETHER WITH the vacated alley by Ordinance No. 6180.