Fee: \$87.00 **UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) 1-800-858-5294 CSC B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 1807 84390 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Oregon (Klamath) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 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 Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME EDGEWOOD RANCH, INC. 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 1c. MAILING ADDRESS 12941 SWAN LAKE RD STATE POSTAL CODE COUNTRY KLAMATH FALLS OR 97603 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 Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 2c MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME DIVERSIFIED FINANCIAL SERVICES, LLC 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 3c. MAILING ADDRESS 14010 FNB PARKWAY STE 400 STATE POSTAL CODE COUNTRY OMAHA NE 68154 USA 4. COLLATERAL. This financing statement covers the following collateral: 1 NEW 2020 MODEL 7000 VALLEY 4 TOWER PIVOT 802', NEW GOULDS 12CHC 60 HP TURBINE PUMP, 60HP DANFOSS VARIABLE FREQUENCY DRIVE, NEW 1340' OF 6" PVC PIPE, 2040' OF 8" PVC PIPE, 600' OF 4" PVC PIPE, 2040' OF #4 AL. W/2 #12 WIRE, MISC. VALVES AND FITTINGS

A Debtor is a Transmitting Utility

Seller/Buyer

Consignee/Consignor

1807 84390

Licensee/Licensor

being administered by a Decedent's Personal Representative

Non-UCC Filing

6b. Check only if applicable and check only one box:

Agricultural Lien

Bailee/Bailor

2020-005022

04/21/2020 09:23:44 AM

Klamath County, Oregon

8. OPTIONAL FILER REFERENCE DATA: :173801-004 JW KERNS

6a. Check only if applicable and check only one box:

7. ALTERNATIVE DESIGNATION (if applicable):

Public-Finance Transaction

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)

Manufactured-Home Transaction

Lessee/Lessor

## **UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS

<ol> <li>NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Staten because Individual Debtor name did not fit, check here</li> </ol>	nent; if line 1b was left blank			
9a. ORGANIZATION'S NAME EDGEWOOD RANCH, INC.		]		
DR 9b. INDIVIDUAL'S SURNAME		_		
FIRST PERSONAL NAME		_		
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE SPACE	IS FOR FILING OFFI	CE USE ONLY
DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor not one one of the Debtor's name) and enter the Debtor's name and enter the Debtor's name and enter the Debtor's name.		t in line 1b or 2b of the Financing S	Statement (Form UCC1) (	use exact, full nam
R 10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
. ADDITIONAL SECURED PARTY'S NAME or ASS	SIGNOR SECURED PART	Y'S NAME: Provide only <u>one</u> na	ame (11a or 11b)	
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		S) SUFFIX
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
	in the last TV FRANCING OTA	TEMPUT		
This FINANCING STATEMENT is to be filed [for record] (or recorded)     REAL ESTATE RECORDS (if applicable)	covers timber to b	e cut covers as-extracted collateral is filed as a fixture filing		
5. Name and address of a RECORD OWNER of real estate described in item (if Debtor does not have a record interest): _AUREN M JESPERSEN,  MOLLY M JESPERSEN	'	<sup>ate:</sup> 10E, 3910-01400-009	003, KLAMATH	COUNTY, (
7. MISCELLANEOUS:				