07/19/2021 01:17:00 PM Fee: \$92.00 **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) 2145 96806 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 Evergreen Softcloth Carwash, LLC 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) POSTAL CODE COUNTRY 1c. MAILING ADDRESS 1710 Harmony Lane STATE Klamath Falls 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 Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME ADDITIONAL NAME(S)/INITIAL(S) 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME SUFFIX 2c. MAILING ADDRESS 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 First Interstate Bank 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 3c. MAILING ADDRESS PO Box 31193 POSTAL CODE COUNTRY Billings MT 59107 USA 4. COLLATERAL: This financing statement covers the following collateral: Purchase Money Security Interest in all Equipment and 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:

A Debtor is a Transmitting Utility

Seller/Buyer

Consignee/Consignor

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

Manufactured-Home Transaction

Lessee/Lessor

Public-Finance Transaction

7. ALTERNATIVE DESIGNATION (if applicable):

8. OPTIONAL FILER REFERENCE DATA

2145 96806

Licensee/Licensor

Non-UCC Filing

Agricultural Lien

Bailee/Bailor

2021-011130

Klamath County, Oregon

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS			
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; because Individual Debtor name did not fit, check here	if line 1b was left blank		
9a. ORGANIZATION'S NAME		4	
Evergreen Softcloth Carwash, LLC			
OR 9b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
ADDITIONAL MAINE(G)/MITTIAL(G)	30/17/	THE ABOVE SPACE IS FOR FILING OFFICE	E USE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name do not omit, modify, or abbreviate any part of the Debtor's name) and enter the		n line 1b or 2b of the Financing Statement (Form UCC1) (us	se exact, full name
10a. ORGANIZATION'S NAME			
OR TOP INDIVIDUALS CURNAME	- 4		
10b. INDIVIDUAL'S SURNAME	6.4		
INDIVIDUAL'S FIRST PERSONAL NAME	7 / /		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		4	SUFFIX
10c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME or ASSIG	NOR SECURED PARTY	'S NAME: Provide only <u>one</u> name (11a or 11b)	
11a. ORGANIZATION'S NAME))		
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	~ \		I
	.)}		
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	e 14. This FINANCING STATE	-MENT	
REAL ESTATE RECORDS (if applicable)	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); Evergreen Softcloth Carwash, LLC.		_≅ at 1616 Washburn Way, Klamath Fall	s, OR
1710 Harmony Lane	97603. See Exhibit A:		
Klamath Fall, OR 97603	See Exhibit A.		
17. MISCELLANEOUS:			

File No.: 355762AM

Page 5

EXHIBIT "A" LEGAL DESCRIPTION

Lots 28-31, Block 310, DARROW 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 EXCEPTING that portion deed for roads recorded August 28, 2005 in Volume M05, page 62215, Microfilm Records of Klamath County, Oregon.



