FILED: JUN 21, 2024 03:25 PM OREGON SECRETARY OF STATE



UCC

MILLARD MOUNTAIN FEN

2861 63355

UCC FINANCING STATEMENT

8. OPTIONAL FILER REFERENCE DATA: a0kUn000003MSgfl	AG					2861 6335
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor	Seller/Buy	er	Bailee/Bailor	Lice	nsee/Licensor
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transmi	A Debtor is a Transmitting Utility		ricultural Lien	Non-UCC	
6a. Check <u>only</u> if applicable and check <u>only</u> one box:		_		6b. Check only if applicable and check only one box:		
	ust (see UCC1Ad, item 17 and Ins	tructions)			cedent's Personal	
		<u></u>				
			•			
(1) Bradco SPV42 42" Pallet Fork & Frame (SN 64	5725)					
(1) Takeuchi BTL867 Bucket (SN 382550-47)						
, , , , , , , , , , , , , , , , , , , ,	,					
(1) 2023 Takeuchi TL6R Compact Track Loader (S	SN 406004490)					
improvements and replacements and any and all p				iiiou	proc	
improvements and replacements and any and all p						
4. COLLATERAL: This financing statement covers the following collateral: Equipment: all equipment described below togethe	r with all narts, acce	ssories at	tachmen	ts substit	utions ren	airs
·	Bend		OF	R 97702		USA
3c. MAILING ADDRESS 123 SW Columbia Street	CITY		STAT	li e		COUNTRY
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	FIRST PERSONAL NAME		ADDITIONAL NAMÉ(S)/INITIAL(S)		SUFFIX
3a. ORGANIZATION'S NAME Allegiant Partners Incorporate		,	,	•		
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC	CURED PARTY): Provide only one	Secured Party n	ame (3a or 3b))	,	
2c. MAILING ADDRESS	CITY		STA	E POSTAL	CODE	COUNTRY
			1,00		(= <i>p</i> (O)	
OR 25. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
2a. ORGANIZATION'S NAME						
	ide the individual Deptor Informatio	marten IV OI Me	mancing state	ment Addendur	in (i Oim OCCTAG)	
 DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full not fit in line 2b, leave all of item 2 blank, check here 	I name; do not omit, modify, or ablide the Individual Debtor information					Debtor's name will
1c. MAILING ADDRESS 1251 REESE CREEK RD	EAGLE POINT		STAT Of			COUNTRY
4- MANUNG APPRECS 4054 DEFOE OPEFIL DD	CITY		- CTA	E IDOCTAL	CODE	COUNTRY
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
OR THE INDIVIDUAL'S SUBMANE	TEIDET DEDOONS STATE		1,00	ITIONIAL NIANCE	(CV/INITIAL /CV	leureiv
18. ORGANIZATION'S NAME MILLARD MOUNTAIN FENC	E & DECK CO. LLC					
	ide the Individual Debtor informatio		Financing State	ement Addendun	n (Form UCC1Ad)	
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full						l Debtor's name will
SEE BELOW FOR SECURED PARTY CONTACT INFORM	MATION	THE ABOV	E SPACE IS	FOR FILING	OFFICE USE	ONLY
LSalem, OR 97301	(S.O.S.)					
	led In: Oregon					
CSC						
2861 63355	[
	-, I					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
SPRFiling@cscglobal.com						
B. E-MAIL CONTACT AT SUBMITTER (optional)						
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294						
A NAME & DHONE OF CONTACT AT SUBMITTED (actions!)						