


SHELBY COMPANY LIMITED

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)

B. E-MAIL CONTACT AT SUBMITTER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

SELCO Community Credit Union
Commercial & Business Banking - Gateway
925 Harlow Road, Suite 220
Springfield, OR 97477

SEE BELOW FOR SECURED PARTY CONTACT INFORMATION

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).

OR	1a. ORGANIZATION'S NAME Shelby Company Limited Liability Company				
	1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 56864 Besson Road		CITY Bend	STATE OR	POSTAL CODE 97707	COUNTRY 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)

OR	2a. ORGANIZATION'S NAME JMEJY Trust dated October 25, 2019				
	2b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS 2623 Lincoln Street		CITY Eugene	STATE OR	POSTAL CODE 97405	COUNTRY USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

OR	3a. ORGANIZATION'S NAME SELCO Community Credit Union				
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3c. MAILING ADDRESS 925 Harlow Road, Suite 220		CITY Springfield	STATE OR	POSTAL CODE 97477	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

All Fixtures and all Rents, revenues, income, issues, profits, and proceeds of any kind (the Rents), whether due now or later, from the real property located at 951 W. 12th Avenue., Eugene, OR 97402 including without limitation chattel paper, accounts and general intangibles relating to the Rents.

6. Check only if applicable and check only one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, Item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check only if applicable and check only one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility	
6b. Check only if applicable and check only one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA:	

Finestra
665 SW Morrison, Suite 300, Portland, OR
97204-1440

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

Shelby Company Limited Liability Company

OR

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

OR

10b. INDIVIDUAL'S SURNAME

Yates

INDIVIDUAL'S FIRST PERSONAL NAME

Eric

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

James

SUFFIX

10c. MAILING ADDRESS

56864 Besson Road

CITY

Bend

STATE

OR

POSTAL CODE

97707

COUNTRY

USA

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one 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):

13. ☒ 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 future filing

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:

Lot 8, in Block 17, JAMES HUDDLESTON EXTENDED ADDITION to Eugene, as platted and recorded in Book 3, Page 17, Lane County Oregon Plat Records, in Lane County, Oregon.

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 ☐**9a. ORGANIZATION'S NAME****Shelby Company Limited Liability Company**

OR

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**

OR

10b. INDIVIDUAL'S SURNAME**Yates****INDIVIDUAL'S FIRST PERSONAL NAME****Jane****INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)****Marie****SUFFIX****10c. MAILING ADDRESS****56864 Besson Road****CITY****Bend****STATE****OR****POSTAL CODE****97707****COUNTRY****USA****11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME:** Provide only one 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):****13. ☒ 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 (if Debtor does not have a record interest):****16. Description of real estate:****Lot 8, in Block 17, JAMES HUDDLESTON EXTENDED ADDITION to Eugene, as platted and recorded in Book 3, Page 17, Lane County Oregon Plat Records, in Lane County, Oregon.****17. MISCELLANEOUS:**