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UCC FINANCING STATEMENT	
FOLLOW INSTRUCTIONS	

FILED: MAR 07, 2025 01:23 PM
OREGON SECRETARY OF STATE

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UCC FINANCING STATEMENT	• •			
FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER [optional]				
MICHAEL MILLS	i	-		
B. E-MAIL CONTACT AT FILER [optional]				
mmlawpc@aol.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
Г.,	-, 			
MICHAEL MILLS	1			
PO BOX 1307	·			
SILVERTON OREGON 97381-0079	· .			
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DEPTOR'S NAME OF THE PARTY OF T			R FILING OFFICE US	
 DEBTOR'S NAME Provide only one Debtor name (1a or 1b) (use exact, name will not fit in line 1b, leave all of item 1 blank, check here and provided and provide	tuil name; do not omit, modify, or appreviate any par ovide the Individual Debtor information in item 10 of t			
1a. ORGANIZATION'S NAME		•		
DIDI'S LLC				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
193 S W DOYLE PL APT 9323	BEAVERTON	OR	97003	USA
DEBTOR'S NAME – Provide only <u>one</u> debtor name (2a or 2b) (use exact, f name will not fit in line 2b, leave all of item 1 blank, check here and pr	full name; do not omit, modify or abbreviate any part or provide the Individual Debtor information in item 10 of			
2a. ORGANIZATION'S NAME				
DR 25. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	LADDITION	IAL NAME(S)/INITIAL(S)	SUFFIX
25. INDIVIDUAL S SURNAME	FIRST PERSONAL NAIVIE	. Abbillion	IAC IAAME(S)/INTTIAC(S)	301112
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
•				
B. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SE	ECURED PARTY): Provide only one Secured Party n	ame (3a or 3b)	k	
3a. ORGANIZATION'S NAME				·
HUSH HUSH EXPRESS INC.				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3998 SW HILLSHIRE DR	PORTLAND	OR	97223	USA
. COLLATERAL: This financing statement covers the following collateral:				
See Attached Exhibit made a part hereto				
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5. Check only if applicable and check only one box: Collateral is held in a	Trust (see UCC1Ad, item 17 and instructions)	being administ	ered by a Decedent's Pers	onal Representative
6. Check only if applicable and check only one box:			•	
Public-Finance Transaction A Debtor is a 1	Fransmitting Utility			
7. ALTERNATIVE DESIGNATION [if applicable]: Lessee/Lessor	Consignee/Consignor Seller/Buyer	Bailee	/Bailor Li	censee/Licensor

8. OPTIONAL FILER REFERENCE DATA

Exhibit A to UCC-1

All tangible Personal Property located at 16784 SW EDY RD SHERWOOD OREGON 97140, including but not limited to trade fixtures, materials, inventory, furniture, fixtures, cash registers, computer terminals, software, operating systems, advertising materials, signage and equipment leases, (2) All trademarks, trade names, and service marks licensed to the Debtor, (3) To the extent transferable, all approvals, authorizations, consents, licenses, permits, franchises, tariffs, orders and other registrations of any federal, state or local court or other governmental department, commission, board, bureau, agency or instrumentality held by the Debtor and all such items acquired by the Debtor hereafter. (4) All rights, benefits, and interests of the Debtor under leases or equipment leases contracts, agreements, commitments, understandings, purchase orders to suppliers, documents and instruments, accounts receivables, All of the forgoing, whether now owned or existing OR hereafter acquired or arising.