FILED: APR 24, 2025 03:48 PM OREGON SECRETARY OF STATE

UCC

MINERAL CREEK LOGGIN

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS	· · · · · · · · · · · · · · · · · · ·	-		,
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 8	18-662-4141			
B. E-MAIL CONTACT AT SUBMITTER (optional) uccfilingreturn@wolterskluwer.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 10104 - Cater	pillar			
Lien Solutions 10388 P.O. Box 29071 Glendale, CA 91209-9071 OROR	 			
File with: Secretary of State, OR SEE BELOW FOR SECURED PARTY CONTACT INFORMA	TION THE ABOVE SPA	CE IS F	OR FILING OFFICE USE	ONLY
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of item 1 blank, check here	ame; do not omit, modify, or abbreviate any part of e Individual Debtor information in item 10 of the Fir	the Debtor	r's name); if any part of the In-	dividual Debtor's
19. ORGANIZATION'S NAME MINERAL CREEK LOGGING & HAULING LLC				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	· 			
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
PO BOX 2369	WHITE CITY		97503-0369	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	s manual popular manual	- Carlotting Ote	nement Addendam (Form 60	
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
2. HAWING APPORTS				
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				
Caterpillar Financial Services Corporation				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2120 West End Avenue 4. COLLATERAL: This financing statement covers the following collateral:	Nashville	TN	37203	USA
ONE (1) CATERPILLAR 558LL Forestry Excavator S/N: F5L00232 And all other equipment heretofore or hereafter leased, sold pursuant to installment sale or financed by secured party whether as lessor, seller or secured party to or for debtor whether as lessee, buyer or debtor, together with all attachments, accessories and accessions thereto and all replacements and substitutions therefore. The above collateral is within the scope of Article 9 of the Uniform Commercial Code (if this statement is filed in New Jersey, specifically Chapter 9 of Title 12A, pursuant to 12A:9-102 and 12A:9-109).				
5. Check only if applicable and check only one box: Collateral is held in a Trust (s	see UCC1Ad, item 17 and Instructions) being	administer	ed by a Decedent's Persona	I Representative
6a. Check only if applicable and check only one box:			if applicable and check only	
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility		Agricultural Lien Non-UCC Filing		
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Co	nsignee/Consignor Seller/Buyer	Bail	ee/Bailor License	ee/Licensor
8. OPTIONAL FILER REFERENCE DATA:				

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