FILED: MAY 16, 2016 05:00 PM OREGON SECRETARY OF STATE



UCC

KGH TRANSFER, INC.

## **UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

7 GEEST MOTROGIONS						
A. NAME & PHONE OF CONTACT AT FILER (optional)  Corporation Service Company 1-800-858-5294	,					
B. E-MAIL CONTACT AT FILER (optional) SPRFilling@cscinfo.com						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
	<b>─</b> . !					
Corporation Service Comp 1127 Broadway St NE Suite 310 Salem, OR 97301	I In: Oregon (S.O. <u>S.)</u>	THE ABOVE SPA	VCE 18 EO	P EII ING (	DEEICE HEE	ONI V
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  and provide		abbreviate any part of	the Debtor	's name); if a	ny part of the In	dividual Debtor's
1a. ORGANIZATION'S NAME KGH Transfer, Inc.	the Individual Debtor informat	ion in item 10 of the F	inancing Sta	atement Adde	endum (Form UC	;C1Ad)
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX	
1c. MAILING ADDRESS 6950 SW Hampton St. Ste 215	сіту Tigard	STATE			COUNTRY	
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		<del></del>				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
2c. MAILING ADDRESS	CITY		STATE	POSTAL CO	DDE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC	JRED PARTY): Provide only of	ne Secured Party nam	ne (3a or 3b	)		
3a. ORGANIZATION'S NAME Commercial Credit Group Inc.						
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	
3c. MAILING ADDRESS 2135 City Gate Lane, Suite 440	сіту Naperville	<del></del>	STATE	POSTAL CO	DDE	COUNTRY
4. COLLATERAL: This financing statement covers the following collateral: All accounts, accounts receivable, chattel paper, contract rights, documents, equipment, fixtures, general intangibles, goods, instruments, inventory, securities, deposit accounts, investment property and all other property of whatever nature and kind, wherever located, in which Debtor now or hereafter has any right or interest and in any and all attachments, accessories, substitutions, replacements, replacement parts, additions, software and software upgrades and all cash and non-cash proceeds (including rental proceeds, insurance proceeds, accounts and chattel paper arising out of or related to the sale, use, rental or other disposition thereof) And, specifically included therein, the following specific items of personal property (1) One 2013 Freightliner Cascadia Sleeper tractor with Detroit DD15 455hp engine, 10 speed trans, 72" sleeper, 12k front, 40k rear 1FUJGLDR9DSBZ2339; (1) One 2013 Freightliner Cascadia Sleeper tractor with Detroit DD15 455hp engine, 10 speed trans, 72" sleeper, 12k front, 40k rear 1FUJGLDRXDSBU5241; (1) One 2012 CIMC 53' refrigerated trailer with Carrier X2100 reefer unit S/N PAM91347751 LJRR53260C6000781; (1) One 2013 Vanguard 53' refrigerated trailer with Cool Globe R8000B S/N PAK91337459 LJRR5326XD6001776 and all attachments, accessories,  5. Check only if applicable and check only one box:    Check only if applicable and check only one box:   Collateral is   Inheld in a Trust (see UCC1Ad, item 17 and Instructions)   Debing administered by a Decedent's Personal Representative   Check only if applicable and check only one box:						
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transmitting Utility		Agricult	Agricultural Lien Non-UCC Filing		
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor	Seller/Buyer	Bail	lee/Bailor	Licens	see/Licensor
8. OPTIONAL FILER REFERENCE DATA: 16859						116044252

## 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 KGH Transfer, Inc. 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SHEERY 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 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 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 POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): substitutions, replacements, replacement parts, additions, software and software upgrades and all cash and non-cash proceeds (including rental proceeds, insurance proceeds, accounts and chattel paper arising out of or related to the sale, use, rental or other disposition thereof) of and to all of the foregoing. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: 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 16. Description of real estate: (if Debtor does not have a record interest); 17. MISCELLANEOUS: