	FILED: JUN 14, 2016 05:19 PM			
	OREGON SECRETARY OF STATE	≣	t	
	# # 1518		-	
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS UCC	LIEN NO. 90860425 MYOE	BY, LLC		
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294				
B. E-MAIL_CONTACT.AT.EILER (optional)				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)			•	
	$\neg 1$			
Corporation Service Comp	·			
1127 Broadway St NE Suite 310 Filed	In: Oregon			
Salem, OR 97301	(S.O.S.)			
4 DEPTOPIC NAME			R FILING OFFICE USE C	
 DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full n name will not fit in line 1b, leave all of item 1 blank, check here and provide th 	name; do not omit, modify, or abbreviate any part of he Individual Debtor information in item 10 of the Fir			
1a. ORGANIZATION'S NAME MYOBY, LLC				
OR				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 2204 S EI Camino Real, Suite 314	city Oceanside	STATE CA	POSTAL CODE 92054	COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name)				dividual Dobtor's
	he Individual Debtor information in item 10 of the Fir			
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	le le constant de la	T		T
2D. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECUR	I RED PARTY): Provide only <u>one</u> Secured Party name	l e (3a or 3b)	
3a. ORGANIZATION'S NAME Columbia State Bank				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	LADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
S. H.S. F. B. S. S. K. W. L. R.	THOU ENGOTAL NAME	ADDITIO	NAL NAME(O)/MITIAL(O)	BOITIA
	спу Wilsonville	STATE OR	POSTAL CODE 97070	COUNTRY
COLLATERAL: This financing statement covers the following collateral:				
The Land and Improvements Together with all Fixture	_			ixed to the
Land or Improvements. The Real Property located at	:: 2809 Market Street Northeast,	Salem	n, OR 97301	
Tax Account ID No.: R26951, R343485 and R26961				
Tax Account ID No.: 120331, 1040403 and 120301				
		•		
•				
Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is held in a Trust (s	see UCC1Ad, item 17 and Instructions) being	administer	red by a Decedent's Bornes	Representation
Check only if applicable and check only one box: Check only if applicable and check only one box:	-		red by a Decedent's Personal f applicable and check <u>only</u> o	
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transmitting Utility	_	ural Lien Non-UCC I	

Consignee/Consignor

Seller/Buyer

Bailee/Bailor

117409142

Licensee/Licensor

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor

8. OPTIONAL FILER REFERENCE DATA: :MYOBY LLC 26002651

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 MYOBY, LLC 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 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 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 POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 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 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): See Exhibit A

17. MISCELLANEOUS:

Exhibit "A"

Real property in the County of Marion, State of Oregon, described as follows:

A TRACT OF LAND SITUATED IN THE SOUTHEAST QUARTER OF THE NORTHWEST QUARTER OF SECTION 24, TOWNSHIP 7 SOUTH, RANGE 3 WEST OF THE WILLAMETTE MERIDIAN, IN THE CITY OF SALEM, COUNTY OF MARION AND STATE OF OREGON, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING AT A POINT ON THE EAST LINE OF PARK AVENUE, SAID POINT BEING EAST 924.00 FEET AND SOUTH 1238.00 FEET FROM THE NORTHWEST CORNER OF THE I.N. GILBERT DONATION LAND CLAIM IN SECTION 24, TOWNSHIP 7 SOUTH, RANGE 3 WEST OF THE WILLAMETTE MERIDIAN IN MARION COUNTY, OREGON, SAID BEGINNING POINT BEING 134.70 FEET SOUTH FROM THE NORTHWEST CORNER OF THAT TRACT OF LAND DESCRIBED IN VOLUME 439, PAGE 0599, MARION COUNTY DEED RECORDS:

THENCE SOUTH 89° 44' EAST 236.90 FEET TO A POINT ON THE EAST LINE OF SAID TRACT OF LAND; THENCE SOUTH ALONG THE EAST LINE OF SAID TRACT OF LAND AND THE EAST LINE OF THAT TRACT OF LAND AS DESCRIBED IN VOLUME 480, PAGE 0564, MARION COUNTY DEED RECORDS, A DISTANCE OF 219.60 FEET TO THE CENTER OF GARDEN ROAD;

THENCE SOUTH 82° 02' WEST ALONG THE CENTER OF SAID ROAD 239.00 FEET TO THE SOUTHWEST CORNER OF THAT TRACT OF LAND DESCRIBED IN VOLUME 337, PAGE 0223, IN DEED RECORDS FOR MARION COUNTY, OREGON;

THENCE NORTH 254.10 FEET TO THE POINT OF BEGINNING.

SAVE AND EXCEPT THAT PORTION CONVEYED TO THE CITY OF SALEM, A MUNICIPAL CORPORATION, BY DEED RECORDED DECEMBER 18, 1969, IN VOLUME 676, PAGE 0105, IN DEED RECORDS OF MARION COUNTY, OREGON.

ALSO SAVE AND EXCEPT THAT PORTION LYING WITHIN THE BOUNDARIES OF MARKET STREET.

THE LEGAL DESCRIPTION WAS CREATED PRIOR TO JANUARY 01, 2008.