<u> </u>			CII EIX:	- MAV 13	2019 09:56 AM	
	•		OREGO	N SECRE	TARY OF STATE	
·						
CC FINANCING STATEMENT				N NO 918		LLC
LLOW INSTRUCTIONS		ucc	LIEI	N NO. 310	,	ė
NAME & PHONE OF CONTACT AT FILER (optional)						
CC DEPARTMENT 8884278713						
E-MAIL CONTACT AT FILER (optional)						
DFUCCFilings@JohnDeere.com SEND ACKNOWLEDGMENT TO: (Name and Address	,					
JOHN DEERE FINANCIAL	′ ₁					
6400 NW 86TH STREET]					•
PO BOX 6630						
JOHNSTON, IA 50131	·	•				
	1					
<u>. </u>		THE	E ABOVE SE	PACE IS FO	OR FILING OFFICE USE	ONLY
DEBTOR'S NAME: Provide only one Debtor name (1e or 1b) (use exact, full name; do not omit, m					
ame will not fit in line 1b, leave all of item 1 blank, check here	and provide the Individual Debtor	information in ite	m 10 of the Fin	nancing State	ment Addendum (Form UCC	1Ad)
1a. ORGANIZATION'S NAME						
CUYBAR, LLC						
1b. INDIVIDUAL'S SURNAME	FIRST PERS	ONAL NAME		ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
NAME AND ADDRESS	Offy			CTATE	I DOCTAL CODE	COUNTRY
MAILING ADDRESS	CITY	TDC		STATE	POSTAL CODE	ŀ
74 LOOKINGGLASS RD DEBTOR'S NAME: Provide only one Debtor name (2a or 2b)		ROSEBURG		OR	97471	US
ame will not fit in line 2b, leave all of item 2 blank, check here 2a. ORGANIZATION'S NAME	and provide the Individual Debto	information in ite	m 10 of the Fir	nancing State	ement Addendum (Form UC	C1Ad)
2a. ORGANIZATION'S NAME			m 10 of the Fir			
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME	FIRST PERS	ONAL NAME	m 10 of the Fir	ADDITIONA	AL NAME(SYINITIAL(S)	C1Ad)
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME ZEIGLER		ONAL NAME	m 10 of the Fir		AL NAME(SYINITIAL(S)	SUFFIX
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME ZEIGLER MAILING ADDRESS	FIRST PERS	ONAL NAME	m 10 of the Fir	ADDITIONA JAME	al name(synnitial(s)	
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME ZEIGLER MAILING ADDRESS SANTA ROSA CT SECURED PARTY'S NAME (or NAME of ASSIGNEE of A	FIRST PERS CUYLE CITY ROSEB	ONAL NAME R URG		JAME: STATE OR	AL NAME(S)/INITIAL(S) S POSTAL CODE	SUFFIX
2b. INDIVIDUAL'S SURNAME ZEIGLER MAILING ADDRESS SANTA ROSA CT SECURED PARTY'S NAME (or NAME of ASSIGNEE OF AS	FIRST PERS CUYLE CITY ROSEB	ONAL NAME R URG		JAME: STATE OR	AL NAME(S)/INITIAL(S) S POSTAL CODE	SUFFIX
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME ZEIGLER MAILING ADDRESS SANTA ROSA CT SECURED PARTY'S NAME (or NAME of ASSIGNEE of A SACT) 3a. ORGANIZATION'S NAME DEERE & COMPANY	FIRST PERS CUYLE CITY ROSEB ASSIGNOR SECURED PARTY): Pro	ONAL NAME R URG vide only <u>one</u> Sec		JAME: STATE OR	AL NAME(SYINITIAL(S) S POSTAL CODE 97471	SUFFIX
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME ZEIGLER MAILING ADDRESS SANTA ROSA CT SECURED PARTY'S NAME (or NAME of ASSIGNEE OF A	FIRST PERS CUYLE CITY ROSEB	ONAL NAME R URG vide only <u>one</u> Sec		JAME: STATE OR	AL NAME(S)/INITIAL(S) S POSTAL CODE	SUFFIX
22. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME ZEIGLER MAILING ADDRESS SANTA ROSA CT SECURED PARTY'S NAME (or NAME of ASSIGNEE of A SECURDANIZATION'S NAME DEERE & COMPANY 3b. INDIVIDUAL'S SURNAME	FIRST PERS CUYLE CITY ROSEB ASSIGNOR SECURED PARTY): Pro	ONAL NAME R URG vide only <u>one</u> Sec		ADDITIONA JAME STATE OR ne (3a or 3b)	AL NAME(S)INITIAL(S) S POSTAL CODE 97471 AL NAME(S)INITIAL(S)	SUFFIX COUNTRY US
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME ZEIGLER MAILING ADDRESS SANTA ROSA CT SECURED PARTY'S NAME (or NAME of ASSIGNEE of A SAME AND	FIRST PERS CUYLE CITY ROSEB ASSIGNOR SECURED PARTY): Pro FIRST PERS CITY JOHNS'	ONAL NAME R URG vide only <u>one</u> Sec		JAME: STATE OR	AL NAME(SYINITIAL(S) S POSTAL CODE 97471	SUFFIX COUNTR US
22. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME ZEIGLER MAILING ADDRESS SANTA ROSA CT SECURED PARTY'S NAME (or NAME of ASSIGNEE of A SAID A SAI	FIRST PERS CUYLE CITY ROSEB ASSIGNOR SECURED PARTY): Pro FIRST PERS CITY JOHNS' Collateral: actor S/N: 105004 63 ies and components, reper relating thereto, and proceeds, and proceed	ONAL NAME R URG Vide only one Sector of Divide NAME TON Dairs and ix of proceed	nprovem oceeds, th	ADDITIONA JAME STATE OR ADDITIONA STATE IA ents, (2) ereto inc	POSTAL CODE 97471 AL NAME(SVINITIAL(S) POSTAL CODE 50131 POSTAL CODE 50131	SUFFIX COUNTRY US SUFFIX COUNTRY US
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME ZEIGLER MAILING ADDRESS SANTA ROSA CT SECURED PARTY'S NAME (or NAME of ASSIGNEE of A SAIGNEE A SAIGNEE OF A	FIRST PERS CUYLE CITY ROSEB ASSIGNOR SECURED PARTY): Pro FIRST PERS CITY JOHNS COllateral: actor S/N: 105004 ies and components, reper relating thereto, and	ONAL NAME R URG Vide only one Sector of Divide NAME TON Dairs and ix of proceed	nprovem ceeds, th	ADDITIONA JAME: STATE OR ADDITIONA STATE IA ents, (2) ereto income	AL NAME(SYINITIAL(S) S POSTAL CODE 97471 AL NAME(SYINITIAL(S) POSTAL CODE 50131 all accounts, general accounts, without	SUFFIX COUNTRY US SUFFIX COUNTRY US
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME ZEIGLER MAILING ADDRESS SANTA ROSA CT SECURED PARTY'S NAME (or NAME of ASSIGNEE of A SAMIZATION'S NAME) 3a. ORGANIZATION'S NAME	FIRST PERS CUYLE CITY ROSEB ASSIGNOR SECURED PARTY): Pro FIRST PERS CITY JOHNS' collateral: actor S/N: 105004 fiss and components, reper relating thereto, and proceeds, and proceed per relating thereto, and proceed	ONAL NAME R URG Vide only one Sector of Divide NAME TON Dairs and ix of proceed	nprovem ceeds, th	ADDITIONA JAME: STATE OR ADDITIONA STATE IA ents, (2) ereto income	POSTAL CODE 97471 AL NAME(SYINITIAL(S) POSTAL CODE 50131 AL NAME(SYINITIAL(S) POSTAL CODE 50131 all accounts, general accounts, general accounts, general accounts account accounts accounts accounts accounts accounts account account accounts accounts account account accounts account account accounts account account accounts account a	SUFFIX COUNTRY US SUFFIX COUNTRY US