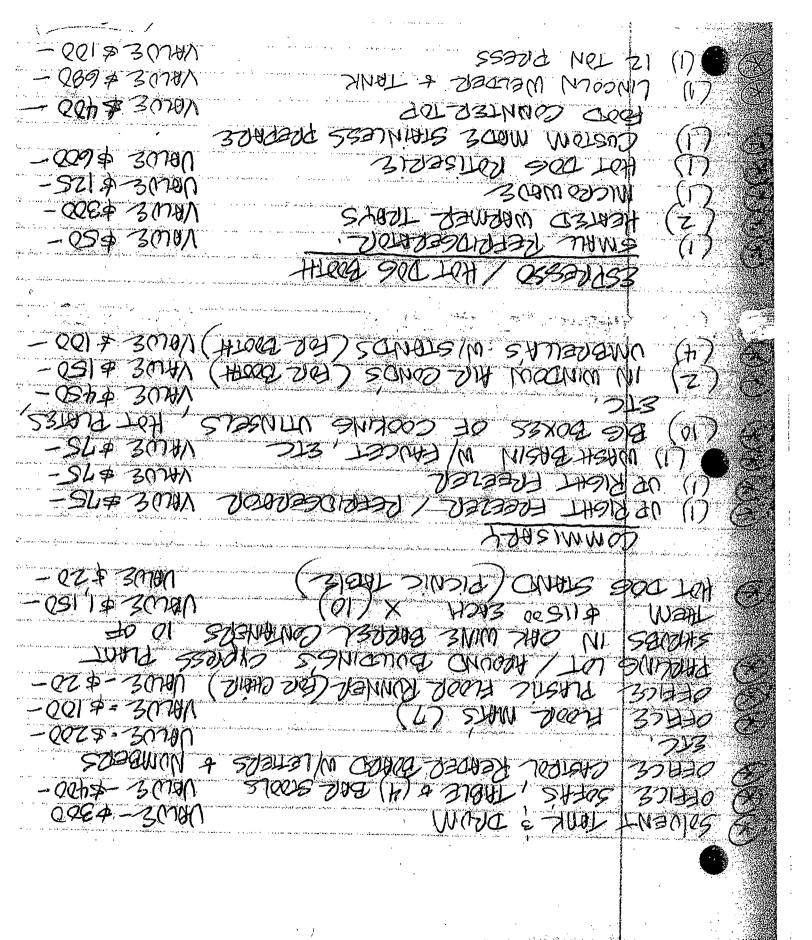
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		,	FILED: JAN 08, 2021 02:26 PM OREGON SECRETARY OF STATE				
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		!					
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS		1	ucc	LIEN NO.	92677953 N	OEL, INC.	
A. NAME & PHONE OF CONTACT AT FILER [optional] Katherine Moyer (541) 686-8511							
B. E-MAIL CONTACT AT FILER [optional]			-			<i>≠</i> .	
kmoyer@hershnerhunter.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)							
Г	. 🗍						
Hershner Hunter, LLP	•					,	
180 East 11th Avenue							
Eugene, OR 97401	,						
L .			THE ABO	VE SPACE IS FOR	R FILING OFFICE US	E ONLY	
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 provide only one of the line in the leave all of Item 1 blank, check here.					me); if any part of the inc		
1a. ORGANIZATION'S NAME Noel, Inc.							
OR 16. INDIVIDUAL'S SURNAME	FIRST PERSONAL	FIRST PERSONAL NAME			L NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS	CITY	CITY			POSTAL CODE	COUNTRY	
391 Rustic Place	Eugene			OR	97401	US	
DEBTOR'S NAME - Provide only one debtor name (2a or 2b) (use exact, funame will not fit in line 2b, leave all of item 1 blank, check here and provide and pro					ne); if any part of the indiversement Addendum (Form		
2a. ORGÁNIZATION'S NAME							
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	FIRST PERSONAL NAME		ADDITIONA	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		
2c. MAILING ADDRESS	СІТҮ	CITY		STATE	POSTAL CODE	COUNTRY	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SE	CURED PARTY): Provi	de only o	ne Secured Part	v name (3a or 3b)	<u>.</u>		
3a. ORGANIZATION'S NAME Automotive Impact, Inc.				, manie (eu er es)			
OR 35. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME		ADDITIONA	L NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS	CITY	CITY			POSTAL CODE	COUNTRY	
88934 Falcon Drive	Elmira	3		OR	97437	US	
4. COLLATERAL: This financing statement covers the following collateral:			•	 _			
All of the equipment and goods, including,	without lim	itatio	n those	listed on th	ve attached F	Evhihit A	
purchased by Debtor from Secured Party,			•			•	
substitutions, new or used, related to any		•		proceeds re	elated to any	of the	
foregoing, including, without limitation, ins	urance proc	eeus				•	
Check only if applicable and check only one box: Collateral is held in a T	rust (see UCC1Ad, item	17 and i	nstructions)	being administer	ed by a Decedent's Pers	onal Representative	
6. Check only if applicable and check only one box:			L				
	ransmitting Utility						
7. ALTERNATIVE DESIGNATION [if applicable]: Lessee/Lessor 8. OPTIONAL FILER REFERENCE DATA	Consignee/Consignor		Seller/Buyer	Bailee/E	Bailor Lie	censee/Licensor	
6. OF HOMAL PILET REFERENCE DATA				•			



000,1 \$ 3018 8437478 - 20070499714 - JASIQ75913 - 94-310 SNICTING 30 3019100 ON0024 39411919 -(195) - - 13(17)1) DESCHANA (NUS) SOOP QQQ\$-300N SIS SHOW HEISTELL - QQ14-3074A DIS Shaang 37140 OFFICE SOUPMENT, DESK, (Z) FILE CABINETS & MISC SMOT 3000012 JO 318AW (5) 605 \$ - 3019V REJUDADO JUH SAMUA JIO SOTOM (50 -000 p-30741 3,003N342NC S7004 380H 710 (2 TOUR SHOW ON SHE COMPUSED -009\$-3(M) TEN. JULY TURNOUNT 一种 一种人的工作的 SACK POON SMAIL PERFORMENT & MICROMONE WAYS- 4/00-MEC MILE SOUTH - MUSHED S CHEMED SHOWS MATOR - 4200--924 - 3MM (1) DEFICE VACUIM CLEANER OSID SUBMERTHE 35H DUXS/W SAV GARS NOTHED DI -051\$ -3(M) THEN CHEINEL SHI (D) STEEM NO STONG DIORNE (S) -08 + THE BLOOM TRUNCH SHOWER THE WAR HOURS AND THE WORLD AND - OH & 3(MA) WOOD SCHILD HAT STEAM MOTHER SO (1) - 05 \$ 730741 SCRESSEE # 7000 TOHEN SHED BOW # 33583578 - 05/4 3074N SOYATES DEP CHEMICAL FIRE EXTINOUSHED BEAUTH B 09640895 -0914 3MW SOLYN #7 125000000 # 121213 DAKSINENITX 3017 MOUNDARD YALL B OR'17 30711 1 9121 4 7211-84 # 701005 (1001) COUNTRY (3710W) LETY ON 1000 310004 000h \$ '30HA A 3611-84 ESIS # 7010=6 1000 (7200W) COMMOST (218W) THU CHUGA 2400A