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		LEE	UCC	LIEN N	D. 92769363 THE	HOUSE OF GAM
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS						•
A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294						
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com			t	÷	,	
C. SEND.ACKNOWLEDGMENT.TO:_(Name.and Address)	<u></u>					
CSC		٠				-
1127 Broadway St NE Suite 310 Filed Salem, OR 97301	In: Oregon					
Salem, OK 37301	(s.o.s.)		THE ABOV	E SPACE IS FO	R FILING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full in page will not fit to live 1b looks about hors.		-	bbreviate any	part of the Debtor		dividual Debtor's
name will not fit in line 1b, leave all of item 1 blank, check here and provide to a ORGANIZATION'S NAME THE HOUSE OF GAMBLIN, LL						, , , , , , , , , , , , , , , , , , ,
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 2734 SE RAYMOND STREET	PORTLAND		STATE OR	POSTAL CODE 97202	COUNTRY	
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full rename will not fit in line 2b, leave all of item 2 blank, check here and provide to the control of the contr					s name); if any part of the Instement Addendum (Form U	
2a. ORGANIZATION'S NAME GAMBLIN ARTISTS COLORS	CO.					
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		
2c. MAILING ADDRESS 2734 SE RAYMOND STREET CITY PORTLAN		D		STATE	POSTAL CODE 97202	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	IRED PARTY): Pro	ovide only or	e Secured Pa	arty name (3a or 3b)	
3a. ORGANIZATION'S NAME Zions Bancorporation, N.A. dba	The Comm	erce Ba	ank of O	regon		
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		
c. MAILING ADDRESS 1211 SW Fifth Ave, Suite 1250 CITY Portland				STATE	POSTAL CODE 97204	COUNTRY
4. COLLATERAL: This financing statement covers the following collateral: All inventory, equipment, accounts, chattel paper, instruments (including but not limited to all promissory notes), letter-of-credit rights, letters of credit, documents, deposit accounts, investment property, money, other rights to payment and performance, and general intangibles (including but not limited to all software and all payment intangibles); all fixtures; all attachments, accessions, accessories, fittings, increases, tools, parts, repairs, supplies, and commingled goods relating to the foregoing property, and all additions, replacements of and substitutions for all or any part of the foregoing property; all insurance refunds relating to the foregoing property; all good will relating to the foregoing property all records and data and embedded software relating to the foregoing property, and all equipment, inventory and software to utilize, create, maintain and process any such records and data on electronic media; and all supporting obligations relating to the foregoing property; all whether now existing or hereafter arising, whether now owned or hereafter acquired or whether now or hereafter subject to any rights in the foregoing property; and all products and proceeds (including but not limited to all insurance payments) of or relating to the foregoing property						
Check only if applicable and check only one box: Collateral is I need in a Trust Check only if applicable and check only one box:	(SEE UCCTAG, ITEM	i i/ and ins	uctions)	7	red by a Decedent's Persona f applicable and check <u>only</u> (
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is	a Transmitti	ng Utility	Agricult	ural Lien Non-UCC	Filing

8. OPTIONAL FILER REFERENCE DATA: THE HOUSE OF GAMBLIN FILE

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 THE HOUSE OF GAMBLIN, LLC 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) 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 GAMBLIN HOLDINGS, LLC 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS2734 SE RAYMOND STREET POSTAL CODE COUNTRY STATE CITY PORTLAND 97202 USA ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11. ADDITIONAL SECURED PARTY'S NAME OF 11a. ORGANIZATION'S NAME OR 116. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT Is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 14, This FINANCING STATEMENT: 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:

FILING OFFICE COPY — UCC FINANCING STATEMENT ADDENDUM (Form UCC1Ad) (Rev. 04/20/11)

17. MISCELLANEOUS: