FILED: DEC 06, 2021 03:53 PM OREGON SECRETARY OF STATE



UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS		UCC LIE	N NO. 93	014674 STALLI	ON HOLDINGS, L	
A. NAME & PHONE OF CONTACT AT FILER [optional]						
Tonna K. Faxon, Esq.						
B. E-MAIL CONTACT AT FILER [optional]						
tfaxon@tkflawyers.com						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					-	
TKF Law, LLC	7!					
	'					
2855 Hayes St, Ste.100						
Newberg, OR 97132						
	1	•	. —			
		THE ABOVE SE	ACE IS FO	R FILING OFFICE USE	= ONLY	
1. DEBTOR'S NAME - Provide only one Debtor name (1a or 1b) (use exact	ct, full name; do not omit, modi					
name will not fit in line 1b, leave all of item 1 blank, check here and p	provide the Individual Debtorio	nformation in Item 10 of the F	inancing Sta	ement Addendum (Form U	CC1Ad)	
1a. ORGANIZATION'S NAME Stallion Holdings, LLC			-			
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL MANE (OVINITIAL (O)		Louise	
TO THE STATE OF TH	PIRST PERSONAL NAI	ME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS	CITY		STATE	I POSTAL CODE	COUNTRY	
14250 SW Barrows Rd, Ste. 1	Tigard		OR	97223	USA	
2. DEBTOR'S NAME - Provide only one debtor name (2a or 2b) (use exact	full name: do not omit, modif	v or abbreviate any part of the	1			
and	provide the Individual Debtor i	information in item 10 of the I	Financing Sta	tement Addendum (Form U	JCC1Ad)	
2a. ORGANIZATION'S NAME				- · · · · · · · · · · · · · · · · · · ·		
OR 2b. INDIVIDUAL'S SURNAME				•	-	
2D. INDIVIDUAL S SURNAME	FIRST PERSONAL NA	ME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY		STATE	I DODE NO DE		
	OIT I		SIAIE	POSȚAL CODE	COUNTRY	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S	SECUPED BARTYL Browing of	anly and Designed Design	(0 0)	<u> </u>		
3a. ORGANIZATION'S NAME	ZOOKED PARTY). Flowide 0	only one secured Party hame	(3a or 3b)			
T-Fax, Inc.						
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	ME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
16066 SW Tualatin Sherwood Rd	Sherwood		OR	97140	USA	
4. COLLATERAL: This financing statement covers the following collateral:				·		
See Attached Exhibit 1						
Cop / Macrica Exhibit 1						
·						
5. Check only if applicable and check only one box: Collateral is held in a	Trust (see UCC1Ad, item 17 :	and instructions) be	ing administe	red by a Decedent's Perso	nal Representative	
Check only if applicable and check only one box:						
Public-Finance Transaction A Debtor is a	Transmitting Utility					
7. ALTERNATIVE DESIGNATION [if applicable]: Lessee/Lessor	Consignee/Consignor	Seller/Buyer	Bailee	Bailor	ensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA			L Dallee	L LICE	en la certifica (190)	
			,			

TAN REPUBLIC: SHERWOOD ASSET LIST

Seq Description USED 2006 KBL AMERICA 5600 USED 2000 TAN AMERICA RED-LIGHT BELIEVE USED 2008 KBL AMERICA GOLD 3500 3 USED 2008 KBL AMERICA GOLD 3500 4. USED 2004 UWE LOTUS 5 USED 2000 SUNDASH 232 6 USED RADIUS 252 .7 USED 2001 MATRIX L33 8 **USED WASHER USED DRYER** 10 USED FLOOR SAFE 11 (3) USED GLASS SHELVES 12 **USED SIGNAGE** 13 USED FURNITURE 14 **USED POS** 15 USED LEASEHOLD IMPROVEMENTS 16 USED DECOR 17 **USED RM 6 AMBITION 250** 18 **SUPPLIES** 19 (2) FILE CABINETS 2 DRAWER 20 LETTER TRAY WIRE 4-TRAY 21 COMPUTER 22 **MONITOR** 23 TMAX TAN TIMER 24 STORAGE CART 25 (3) LAUNDRY BASKET 26 (3) WALL ART 27 3 DRAWER STORAGE 28 **4 DRAWER STORAGE** 29 (9) WASTE BASKETS 30 (2) SECURITY CAMERAS 31 (2) RECEPTION TABLES 32 (9) RUGS FOR ROOM 33 (2) TOWEL WASTE BASKETS 34

(3) CHAIRS WHITE RECEPTION

35

- 36 (3) CHAIRS BLACK
- 37 VERSA TOWEL STORAGE
- 38 BASKET FOR VERSA
- 39 MIRROR
- 40 HAIR NET STORAGE
- 41 MOP
- 42 BROOM & DUST PAN
- 43 VACUUM
- VERSA \$RAY BOOTH
- 45 (2) RECEPTION LAMPS
- 46 AREA RUG RECEPTION
- 47 (6) ROOM STOOLS
- 48 BROTHER COPIER
- 49 DRYER
- 50 PHONE
- 51 SIGN