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| UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS | | | · | | |
| A. NAME & PHONE OF CONTACT AT FILER (optional) | | | | | |
| Online Dept 888-507-4593 B. E-MAIL CONTACT AT FILER (optional) | | | | | |
| B. L-WALL GONTACT AT FILER (Optional) | | | I ED. DE | C 46, 2024 05-04 D | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | 8 pgs | | | C 16, 2021 05:04 P CRETARY OF STA | |
| DATA RESEARCH INC. | " " " " | | | | |
| 8130 SW Beaverton-Hillsdale | • | | | | |
| Portland, OR 97225 | | UCC | LIEN NO. | 930 25 539 970 | III 16 SE DUKE LLC |
| <u>UC</u> C1-863631 State of | of Oregon, OR | THE ABOVE SPA | ACE IS FO | R FILING OFFICE US | SE 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 the control of the | | modify, or abbreviate any part o or information in item 10 of the F | | | |
| 1a. ORGANIZATION'S NAME | | | | | · · · · · · · · · · · · · · · · · · · |
| OR 9706 SE Duke LLC 1b. INDIVIDUAL'S SURNAME | FIRST PERSONA | I NAME | IADDITIO | NAL NAME(S)/INITIAL(S | SUFFIX |
| | | | | | , |
| 1c. MAILING ADDRESS | CITY | CITY | | POSTAL CODE | COUNTRY |
| 8733 SE Division St STE 201 | Portland | | | 97266 | USA |
| DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, the name will not fit in line 2b, leave all of item 2 blank, check here and provide name will not fit in line 2b. | | modify, or abbreviate any part or or information in item 10 of the F | | | |
| 2a. ORGANIZATION'S NAME | | | | (0 | |
| OR | | | | | |
| 2b. INDIVIDUAL'S SURNAME | FIRST PERSONA | LNAME | 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 SE 3a. ORGANIZATION'S NAME | CURED PARTY): Pro | vide only one Secured Party nar | ne (3a or 3b |) | |
| Umpgua Bank | | | | | |
| OR Umpqua Bank 3b. INDIVIDUAL'S SURNAME | FIRST PERSONA | FIRST PERSONAL NAME | | ADDITIONAL NAME(S)/INITIAL(S) | |
| 3c. MAILING ADDRESS | CITY | | OTATE | Incort Conf | , , |
| PO Box 2131 | Spokane | | STATE | POSTAL CODE 99210 | COUNTRY |
| 4. COLLATERAL: This financing statement covers the following collateral: | Броканс | | WA | 99210 | USA |
| 1.DEFINITIONS. As used in this Collateral de- | scription, the | following words h | ave the | e meanings sta | ted |
| below:1.1Grantor and Debtor. The word "Gran | _ | _ | | _ | |
| Statement.1.2Real Property. The term "Real Property. | | | | | |
| Duke St, Portland, OR 97266 more particularly | | | | | • |
| egress to the Real Property: A portion of Lot 7, | | - | | - | • |
| | | • | _ | | l l |
| one-quarter of Section 21, Township 1 South, R | | | | | |
| County of Multnomah and State of Oregon, bein | - | - | | • • | |
| Northwest corner of said Lot 7, Block 2; said po Avenue (60 feet in width), and the South right of | | | | | |
| Check only if applicable and check only one box: Collateral is held in a Tru | ust (see UCC1Ad, item | 17 and Instructions) bein | g administer | ed by a Decedent's Pers | onal Representative |
| 6a. Check only if applicable and check only one box: | ,,,,, | | | applicable and check or | • |
| Public-Finance Transaction Manufactured-Home Transaction | A Debtor is a | a Transmitting Utility | Agricult | ural Lien Non-U | CC Filing |
| 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor | Consignee/Consign | or Seller/Buyer | Bai | lee/Bailor Li | censee/Licensor |
| 8. OPTIONAL FILER REFERENCE DATA: FUCC1-8636311 [996774584-1] | | | | | |

| 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing | Statement; if line 1b was | eft blank | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|------------------------------|--------------------------------|------------------------|------------------|
| 9a. ORGANIZATION'S NAME | | | | | 1 |
| 9706 SE Duke LLC 9b. INDIVIDUAL'S SURNAME | | | | | |
| FIRST PERSONAL NAME | | | | | |
| ADDITIONAL NAME(S)/INITIAL(S) | | SUFFIX | THE ABOVE SPACE | S FOR FILING OFFICE | LISE ONLY |
| DEBTOR'S NAME: Provide (10a or 10b) only one additional De do not omit, modify, or abbreviate any part of the Debtor's name) ar 10a. ORGANIZATION'S NAME | | e that did not fit in line 1 | | | |
| OR 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 11a. ORGANIZATION'S NAME | ASSIGNOR SECU | RED PARTY'S NA | ME: Provide only <u>one</u> na | ame (11a or 11b) | |
| OR 11b. INDIVIDUAL'S SURNAME | FIRST PER | SONAL NAME | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
| 11c. MAILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTRY |
| 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 8735'45" East along said South right of wawith a yellow plastic cap stamped "Marx A | Assoc"; thence | South 0007'59 | " East, paralle | l with said East | right of w |
| line of SE 97th Avenue, a distance of 88.0 Assoc"; thence North 8735'45" West, para | | | • • | | |
| inch iron rod with a yellow plastic cap star | | | • | | |
| This FINANCING STATEMENT is to be filed [for record] (or rec REAL ESTATE RECORDS (if applicable) 15. Name and address of a RECORD OWNER of real estate described in the state of the state described in the state of the sta | co | NANCING STATEMENT | : covers as-extracted | collateral is filed as | a fixture filing |
| (if Debtor does not have a record interest): | illem to To. Descri | otion of real estate: | | | |
| | | | | | 1 |
| | | | | | |
| | | | | | |
| | | | | | |
| 17. MISCELLANEOUS: | | | | | |

| NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State because Individual Debtor name did not fit, check here | itement; if line 1b was l | eft blank | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|---------------------------------------------|--------------------------------|---------------------------------------|------------------|
| 9a. ORGANIZATION'S NAME | | | • | | |
| 9706 SE Duke LLC 9b. INDIVIDUAL'S SURNAME | | | | | |
| FIRST PERSONAL NAME | | | | | |
| ADDITIONAL NAME(S)/INITIAL(S) | | SUFFIX | HE ABOVE SPACE I | S FOR FILING OFFICI | F LISE ONLY |
| 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor do not omit, modify, or abbreviate any part of the Debtor's name) and e | | that did not fit in line 1b | | | |
| 10a. ORGANIZATION'S NAME | | • | | | |
| OR 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 A | SSIGNOR SECU | RED PARTY'S NAM | ME: Provide only <u>one</u> na | me (11a or 11b) | |
| | | | | | |
| OR 11b. INDIVIDUAL'S SURNAME | FIRST PER | SONAL NAME | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
| 11c. MAILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTRY |
| 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): | <u> </u> | | | | |
| 0007'59" West, along said right of way line, | | | - | | |
| The word "Improvements" means all buildir | | | - | - | |
| nature now or hereafter located on or about the Improvements, 2 DER CON | - | - | | | |
| Property and the Improvements. 2.PERSON owned by tenants occupying the Improveme | | • | | | |
| 13. This FINANCING STATEMENT is to be filed [for record] (or record | | NANCING STATEMENT: | | ire now owned | and/or |
| REAL ESTATE RECORDS (if applicable) 15. Name and address of a RECORD OWNER of real estate described in its (if Debtor does not have a record interest): | co | vers timber to be cut ction of real estate: | covers as-extracted of | collateral is filed as | a fixture filing |
| (ii besite) dees liet lave a leeste interesty. | | | | | 1 |
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| 17. MISCELLANEOUS: | | | | · · · · · · · · · · · · · · · · · · · | |

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 9706 SE Duke 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 ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a, ORGANIZATION'S NAME 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): hereafter acquired and situated upon and/or used in connection with the operation, ownership, use or enjoyment of the Premises including, without limitation, the following: 2.1 All accounts, chattel paper, contracts for sale, deposit accounts, documents, documents of title, contract rights, general intangibles, payment intangibles, letters of credit, goods, instruments and assumed business names of Grantor relating to the Premises;2.2All equipment, inventory, furnishings, appliances, machinery, tools, building materials, supplies, maintenance or service equipment and 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 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: (if Debtor does not have a record interest): 17. MISCELLANEOUS:

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 9706 SE Duke 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 OR 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 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 STATE | POSTAL CODE COUNTRY CITY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): other raw materials or supplies, component parts and work in progress relating to the Premises;2.3All warranties, licenses, franchises, plats, as-built plans, approvals, permits, drawings, specifications and construction contracts relating to the Premises or Grantor's business operations on the Premises; 2.4All commercial tort claims with respect to the Premises and other legal and equitable claims, judgments and awards now or hereafter accruing to the benefit of Grantor and/or the Premises; 2.5 All bonding, construction, development, financing, guaranty, 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 covers as-extracted collateral 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): 17. MISCELLANEOUS:

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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 9706 SE Duke 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 OR 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 ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): food and bar services; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing 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: (if Debtor does not have a record interest):

17. MISCELLANEOUS: