This FINANCING	STATEMENT is presen	ited for filing pu	rsuant to the	Nevada Uni	form Commer	cial Code	
DEBTOR (LAST NAME FIRST)				· · · · · · · · · · · · · · · · · · ·	1A. SOCIAL	SECURITY OR FEDI	RAL TAX NO.
Jack Dudenho . MAILING ADDRESS	oefer		1C. CITY, STA			-5027	
P.O. Box 1912							D. ZIP CODE
RESIDENCE ADDRESS (IF AN INDIVIDU	JAL AND DIFFERENT THAN 19	)	1F. CITY, STA	yr Cove,	<u>Nevada</u>		89448 IG. ZIP CODE
484A McFaul			Zephy	r Cove.	Nevada 🖊		89448
ADDITIONAL DEBTOR (IF ANY) (LAST !	NAME FIRST)					SECURITY OR FEDE	
MAILING ADDRESS			2C. CITY, STA	TE	\ -	1	2D. ZIP CODE
RESIDENCE ADDRESS (IF AN INDIVIDU	JAL AND DIFFERENT THAN 20	)	2F. CITY, STA	TE		1	2G. ZIP CODE
DEBTOR(S) TRADE NAME OR STYLE (II	F ANY)		<u> </u>		3A. FEDER	PAL TAX NO.	<del></del>
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ADDRESS OF DEBTOR(S) CHIEF PLACE	E OF BUSINESS (IF ANY)		4A. CITY, STA	TE		7 /	4B. ZIP CODE
SECURED PARTY			ł			SECURITY NO., FEE BANK TRANSIT AND	
	anking Company			The state of the s	110.01		
	O. Box 5700	<u></u>			94	-16 <del>1</del> /121	2
CITY Stateline ASSIGNEE OF SECURED PARTY (IF ANY	STATE	Nevada	ZIP	CODE 894	49	SECURITY NO., FEE	1
NAME	•			1 1		BANK TRANSIT AND	
MAILING ADDRESS		( (			1 1		
CITY	STATE		ZIP	CODE			
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