

UNIFORM COMMERCIAL CODE-FINANCING STATEMENT-FORM UCC-1  
IMPORTANT-Read instructions on back before filling out form

STATE OF NEVADA

BANK AND BANKERS DIVISION  
DIAMOND INTERNATIONAL CORPORATION  
P.O. BOX 4000 - RENO, NEVADA 89503

This FINANCING STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code

1. DEBTOR (LAST NAME FIRST) KENYON, Don E.		1A. SOCIAL SECURITY OR FEDERAL TAX NO. -0197	
1B. MAILING ADDRESS P. O. Box 1193		1C. CITY, STATE Gardnerville, Nevada	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)		1F. CITY, STATE	
1D. ZIP CODE 89410		1G. ZIP CODE	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS		2C. CITY, STATE	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)		2F. CITY, STATE	
2D. ZIP CODE		2G. ZIP CODE	
3. DEBTOR(S) TRADE NAME OR STYLE (IF ANY) Kenyon Painting Service		3A. FEDERAL TAX NO.	
4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY) 669 Bowles Lane		4A. CITY, STATE Gardnerville, Nevada	
		4B. ZIP CODE 89410	
5. SECURED PARTY NAME Security Bank of Nevada MAILING ADDRESS P. O. Box 458 CITY Minden, STATE Nevada ZIP CODE 89423		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 94-42	
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	

7. This FINANCING STATEMENT covers the following types or items of property (if crops or timber, include description of real property on which growing or to be grown and name of record owner of such real estate, if fixtures, include description of real property to which affixed or to be affixed and name of record owner of such real estate; if oil, gas or minerals, include description of real property from which to be extracted.

Inventory, Equipment and Accounts Receivable, Now owned or hereafter acquired.

7A. RECORD OWNER OF REAL PROPERTY	7B. \$ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)			
8. Check <input checked="" type="checkbox"/> if Applicable	A <input checked="" type="checkbox"/> Proceeds of collateral are also covered	B <input type="checkbox"/> Products of collateral are also covered	C <input type="checkbox"/> Proceeds of above described original collateral in which a security interest was perfected	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction

9. (Date) July 10, 1987

By: Kenyon Painting Service

By: Don E. Kenyon, Owner (TITLE)

By: Security Bank of Nevada

By: Gordon J. Hella/AVI (TITLE)

10. This Space for Use of Filing Officer (Date, Time, File Number and Filing Officer)

**06530**

REQUESTED BY Security Bank of Nev.

IN OFFICIAL RECORDS OF NEVADA

'87 JUL 13 AM 11:35

SUZANNE BEAUDREAU  
RECORDER **158112**

\$ 6- PAID AVI DEPUTY

11.  Return Copy to

NAME Security Bank of Nevada  
ADDRESS P. O. Box 458  
CITY, STATE Minden, Nevada 89423  
AND ZIP

THIS SPACE FOR USE OF FILING OFFICER