

STATE OF MINNESOTA

For Filing

UCC-1 FINANCING STATEMENT				Officer	
This statement is presented for filing presented fo	ursuant to <i>Minnesota Unifor</i> (Type in Black Ink)	m Commerci	al Code Minnesota		
1. Individual Debtor - Last Name MIDWEST HOSPITALITY, INC.		t Name	Middle I.	^	
So 113-	Mailing Address		SOUTH		
City		State	State Zip Code		
BUFFALO 2. Individual Debtor - Last Name		First Name	<u>55313</u> e Middle I.	\ \	
Social Security # Mailing Address				1	\
City		State	Zip Code		\ .
3. Business Debtor - Name					
Fed. ID #	Mailing Address				
City			State	Zip Code	
4. Secured Party Name		5. Assigne	ee of Secured Party		
TELERENT LEASING COR Mailing Address	PORATION	Mailing A	ddress		
P.O. BOX 26627			<u> </u>	10	
City State		City		State	Zip Code
6. This financing statement covers the followard followard followard for the state of the equipment installed in: DAYS INN, 4810 HWY. 29 SOUR Equipment is leased to debuyer of the premises upon to secured party under leases assumption is a condition of the experiment of the secured party and the experiment of the experiment of the premises upon to secure of the premises upon the secure of the premises upon the experiment of the experiment o	R LOCKS/1 PASSPORT reafter acquired, o TH, ALEXANDRIA, MN tor by secured part which equipment is se, without modific	SYST. & for remo 56308 sy. Debtorated ation of	ALL RLTD EQUIPOVED from the ris contraction to assume all the terms and the property.	PMNT Debtor's pro ually bound to the second tions a transmitting utility	emises. This to cause any s obligations
RETURN ACKNOWLEDGEME TELERENT LEASING P.O. Box 26627 Raleigh, NC 276	CORPORATION	ddress)	O · Debror's S	ignature in Most Cases see in	(Red)
Please do not type o	outside the bracketed area.		(/ ^	TI UE OU	0 9251

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IN OFFICIAL RECORDS OF DOUGLAS CO.. NEVADA

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LINDA SLATER RECORDER BK0497PG2068

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