

**UNIFORM COMMERCIAL CODE - FINANCING STATEMENT - FORM N-UCC-1**  
 This FINANCING STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code

**IMPORTANT:**

<b>1. DEBTOR</b>	
<input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)	LANDIS, Charlene
[REDACTED]-1724	
<b>1 B. MAILING ADDRESS</b>	
1679 Highway 395, Suite "I"	
<b>1 C. CITY, STATE</b>	Minden, NV
<b>1 D. ZIP CODE</b>	89423
<b>1 E. RESIDENCE ADDRESS</b>	
1361 Kimmerling Road	
<b>1 F. CITY, STATE</b>	Gardnerville, NV
<b>1 G. ZIP CODE</b>	89410
<b>2. ADDITIONAL DEBTOR (IF ANY)</b>	
<input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)	Landis Chiropractic Center
[REDACTED]-1724	
<b>2 B. MAILING ADDRESS</b>	
1679 Highway 395, Suite "I"	
<b>2 C. CITY, STATE</b>	Minden, NV
<b>2 D. ZIP CODE</b>	89423
<b>2 E. RESIDENCE ADDRESS</b>	
[REDACTED]	
<b>2 F. CITY, STATE</b>	[REDACTED]
<b>2 G. ZIP CODE</b>	[REDACTED]
<b>3. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET</b>	
<b>4. SECURED PARTY</b>	
NAME	Nevada Microenterprise Initiative
MAILING ADDRESS	113 West Plumb Lane
CITY	Reno
STATE	NV
ZIP CODE	89509
88-0330270	
<b>5. ASSIGNEE OF SECURED PARTY (IF ANY)</b>	
NAME	
MAILING ADDRESS	
CITY	
STATE	
ZIP CODE	
<b>6. 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 growing 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).</b>	
All machinery, equipment, furniture, fixtures and/or receivable now owned, purchased with this loan proceeds, and/or thereafter acquired, wherever located, and proceeds there from.	
<b>6 A.</b>	<b>6 C.</b> \$35,000.00
SIGNATURE OF RECORD OWNER	MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)
<b>6 B.</b>	
(TYPE) RECORD OWNER OF REAL PROPERTY	
<b>7. Check if Applicable</b>	<b>A. <input type="checkbox"/> Proceeds of collateral are also covered. NRS 104.9306</b>
	<b>B. <input type="checkbox"/> Products of collateral are also covered. NRS 104.9402</b>
	<b>C. <input type="checkbox"/> Proceeds of above described original collateral in which a security interest was perfected (Debtor's Signature Not Required). NRS 104,9402</b>
	<b>D. <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction (Debtor's Signature Not Required). NRS 104.9402</b>
<b>8. Check if Applicable</b>	<input type="checkbox"/> DEBTOR IS A "PUBLIC UTILITY IN ACCORDANCE WITH NRS 105.010

**9**

By Darlene Landis (Date) February 28, 2001 Owner  
 SIGNATURE(S) OF DEBTOR(S) (TITLE)

By Anna H. Siefert Operations Mgr.  
 SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

TYPE NAME(S)

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

**08697**

REQUESTED BY  
Nevada Micro Ent  
 IN OFFICIAL RECORDS OF  
 DOUGLAS CO., NEVADA

**2001 JUN 15 PM 4:35**

LINDA SLATER  
 RECORDER

\$16 PAID 10 DEPUTY

**0516529**

**BK0601PG4099**

**10** Return Copy to:

NAME	Nevada Microenterprise Initiative	Trust Account Number (if Applicable)
ADDRESS	1600 East Desert Inn Road, Suite 210	
CITY STATE AND ZIP	Las Vegas, NV 89109	