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REQUESTED BY
U.S. Corporate
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2003 NOV -4 PM 2:52

WERNER CHRISTEN
RECORDER

41 PAID 2 DEPUTY

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] UCC Filing Desk - (651) 227-7575	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
<input checked="" type="checkbox"/> US Corporate Services PO Box 65607 St. Paul, MN 55165	

*DT
M210884*

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME				
OR				
1b. INDIVIDUAL'S LAST NAME BENTON		FIRST NAME CLINT	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 209 KINGSBURY LANE		CITY STATELINE	STATE NV	POSTAL CODE 89449
1d. TAX ID #: SSN OR EIN [redacted] 0659		ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION NV
			1g. ORGANIZATIONAL ID #, if any	<input checked="" type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME BENTON		FIRST NAME LINDA	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS 209 KINGSBURY LANE		CITY STATELINE	STATE NV	POSTAL CODE 89449
2d. TAX ID #: SSN OR EIN		ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION NV
			2g. ORGANIZATIONAL ID #, if any	<input checked="" type="checkbox"/> NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME US BANCORP				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1310 MADRID STREET, STE 101		CITY MARSHALL	STATE MN	POSTAL CODE 56258
				COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

L#160819; SCHEDULE A AND LEGAL LAND DESCRIPTION TO FOLLOW

5. ALTERNATIVE DESIGNATION (if applicable): LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional) (ADDITIONAL FEE) All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA

160819

08780

10/29
(4)

0595875

BK1103PG01494

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

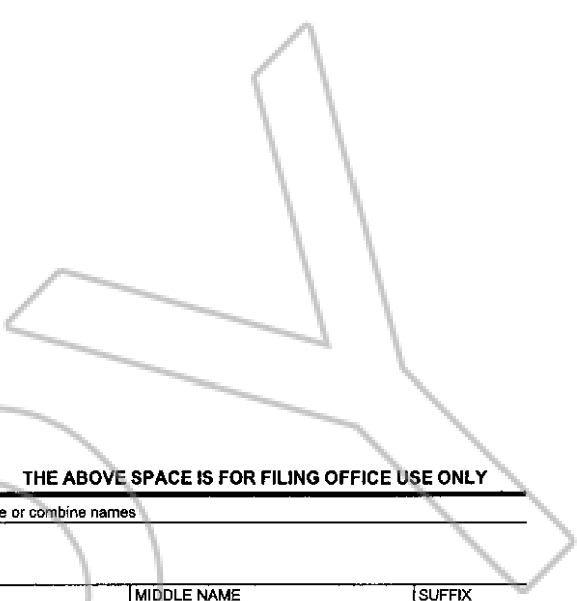
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S LAST NAME BENTON	FIRST NAME CLINT	MIDDLE NAME, SUFFIX
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10. MISCELLANEOUS:



THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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11c. MAILING ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY
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11d. TAX ID #: SSN OR EIN

ADD'L INFO RE ORGANIZATION DEBTOR

11e. TYPE OF ORGANIZATION

11f. JURISDICTION OF ORGANIZATION

11g. ORGANIZATIONAL ID #, if any NONE

12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME

OR

12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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12c. MAILING ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY
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13. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a fixture filing.

14. Description of real estate:

LEGAL LAND DESCRIPTION TO FOLLOW

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

**GARY MICHELSEN
PO BOX 2010
STATELINE NV 89449
775-588-3305**

16. Additional collateral description:

17. Check only if applicable and check only one box.
Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate

18. Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY

Filed in connection with a Manufactured-Home Transaction — effective 30 years

Filed in connection with a Public-Finance Transaction — effective 30 years

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ATTN:
AMY

Kingsbury Station

A.P.N. 7-130-10

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Mail original deed to:

Mail tax statements to:

AVANSINO, MELARKEY & KNOBEL
Wiegand Center
165 West Liberty Street
Reno, Nevada 89501

MR. JOHN E. MICHELSEN
Post Office Box 646
Zephyr Cove, Nevada 89448

QUITCLAIM DEED

R.P.T.T. § 110

WITHOUT CONSIDERATION, JOHN E. MICHELSEN and ANN J. MICHELSEN, husband and wife, as community property, hereby convey and quitclaim to MICHELSEN KINGSBURY STATION, a Nevada general Partnership, the real property situate in the County of Douglas, State of Nevada, and legally described as follows:

A portion of the Northwest 1/4 of the Northwest 1/4 of Section 26, Township 13 North, Range 18 East, M.D.B.&M., described as follows:

Beginning at a point in the Southerly right of way line of Kingsbury Grade, as described in the conveyance to the County of Douglas, recorded June 5, 1957, in Book C-1 of Deeds at Page 417, Douglas County, Nevada records, from which the Section corner common to Sections 22, 23, 26, and 27 of said Township and Range bears North 76°47'50" West a distance of 388.80 Feet; thence South 17°40' East a distance of 90.00 Feet, to the Point of Beginning; thence North 81°11'57" East a distance of 138.00 Feet; thence South 10°12'28" East a distance of 175 feet to a point, thence in a Southwesterly direction to a point which is South 17°40' East a distance of 180 Feet from the Point of beginning, thence North 17°40' West a distance of 180 Feet to the Point of Beginning.

Together with a 15 Foot easement lying Easterly of the second bearing of parcel herein described as South 10°12'28" East and running to Kingsbury Grade Road, for purposes of ingress and egress, and utility purposes.

LEGAL PRICES OF
AVANSINO, MELARKEY
& KNOBEL
ATTORNEYS AT LAW
165 WEST LIBERTY STREET
RENO, NEVADA 89501

EP2118/ESFM

- 1 -

216766
BOOK 1289 PAGE 2074

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BK 1103 PGO 1496

EQUIPMENT SCHEDULE "A"

AGREEMENT # 160819

This Equipment Schedule "A" is to be attached to and become part of that Schedule of financed Equipment dated _____

, 20 _____

by and between the undersigned and _____

US BANCORP BUSINESS EQUIPMENT FINANCE GROUP (Financer).

QTY	DESCRIPTION	MODEL NO.	SERIAL NO.
Vendor: CONTINENTAL GIRBAU			
6	MAT12PDBAW MAYTAG TOP LOAD WASHER WHITE		
6	FSD COIN BOX & SERVICE LOCK		
9	H5020CCA1371P CONTINENTAL 18# HIGH EFFICENCY FL WASHER W/ PUMP DRAIN		
6	H2030CM11310 CONTINENTAL 30# SOFT MOUNT FRONT LOAD WASHER 240/60/1		
8	MLG31PCA WW MAYTAG 30# NAT GAS DRYING TUMBLER 6500 ELEVATION WHITE		

This Equipment Schedule "A" is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Customer:	CLINT & LINDA BENTON
	D/B/A KINGSBURY STATION LAUNDROMAT
Signature: X	<input type="text"/>
Title:	<input type="text"/>



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97%