	· —	<u> </u>			_	REQUEST	ED BY		
7					Ju	dith F	10#2		
					11	OFFICIAL RE	CORDS OF		
					٤.	OVGLAS CO.	NEVADA		
		STATEMENT		2004 DEC -7 PM 3: 16					
		S (front and back) CAREFULLY ONTACT AT FILER [optional]		T / \					
	ith A. Otto (77:			WERNER CHRISTEN					
B. SEN	ID ACKNOWLEDGE	MENT TO: (Name and Address)			RECORDER				
1	Judith A. Ot	to I td			\$20	PAID KZ	DEPUTY		
ŀ		l Way, Suite A	Ī						
İ	Reno, Nevad					\	\		
				/-	No.	\	\		
							\		
	<u></u>				The same of the sa		\		
1 DE8	TOP'S EVACTED	LLLEGAL NAME - insert only one debtor name (1a or 1b)	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY						
_	ORGANIZATION'S NA		- do not appreviate or combine names						
S	IERRA NEVA	DA RESTAURANT GROUP, LTD	. /						
OR 1b.	INDIVIDUAL'S LASTN	AME	FIRST NAME		MIDDLE	NAME	SUFFIX		
10 MAII	LING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY		
			(1	NV		COUNTRY		
	BOX 2868 INSTRUCTIONS	ADD'L INFO RE 1e. TYPE OF ORGANIZATION	MINDEN 1f. JURISDICTION OF ORGANIZA	ATION		89423 ANIZATIONAL ID#, if a	iny		
		ORGANIZATION LLC	NEVADA		1/		NONE		
		S EXACT FULL LEGAL NAME - insert only one d	ebtor name (2a or 2b) - do not abbre	viate or combine na	mes				
2a.	ORGANIZATION'S NA	ME		\vee /					
OR 2b	. INDIVIDUAL'S LAST N	NAME	FIRST NAME		MIDDLE	NAME	ISUFFIX		
				. 1					
2c. MAI	LING ADDRESS		CITY	\	STATE	POSTAL CODE	COUNTRY		
					1				
2d. <u>SEE</u>	EINSTRUCTIONS	ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION	2f. JURISDICTION OF ORGANIZ	ATION	2g. ORG	ANIZATIONAL ID#, if a	. –		
2 850	LIBED BARTVE	DEBTOR NAME of TOTAL ASSIGNEE of ASSIGNOR S/		(225)			NONE		
	ORGANIZATION'S NA		-)-Insertonly one secured party name	e (Sa Or SB)	-				
			__\						
- 1	. INDIVIDUAL'S LAST I	NAME	FIRST NAME		MIDDLE NAME		SUFFIX		
	LING ADDRESS		LORI		DALY STATE POSTAL CODE CO		COUNTRY		
- 1	BERNING W		/_/			POSTAL CODE	COUNTRY		
		A Y NT covers the following collateral:	GARDNERVILLE	_	NV	89460			
e e	A. C.	l be all furniture, fixtures, equipme	nt inventory and lease	hold impro	vomant	s of Dobtor n	ow owned or		
		, which are used in the operation of							
		inden, Nevada, together with all in							
		-							
CR	OSS INDEX A	S REAL PROPERTY							
_ \									
1	\	/ /							
V		/ /							
1		/ /							
//	1								
5 A1 7	EDMATIVE DESIGNAT	TON [if applicable]: LESSEE/LESSOR CONS	SIGNEE/CONSIGNOR BAILE	E/BAILOR S	ELLER/BU	JYER AG. LIEN	NON-UCC FILING		
	ERNATIVE DESIGNAT	EMENT is to be filed (for record) (or recorded) in the RE							
8, OPT	ESTATE RECORDS. TONAL FILER REFERE	Attach Addendum iff applic	AND I INDUITIONAL FEET	lobfic	11211				
						0	8820		
	O DEFICE CORV	LICC SINANCING STATEMENT /FORM	UCC4) (BEV 05/22/02)			06313	0.7		

0631307 BK1204PG03086

	t and back) CAREFULLY (1a or 1b) ON RELATED FINANCING S					
9a. ORGANIZATION'S NAME				\ \		
	RESTAURANT GROUP, LT				\ \	
9b, INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			\ \	
, MISCELLANEOUS:		· · · · · · · · · · · · · · · · · · ·			\ \	
		/_/		-	IS FOR FILING OFFIC	E USE ONLY
	EXACT FULL LEGAL NAME - insert only on	e name (11a or 11b) - do not abbrev	riate or combine nam	es		
11a, ORGANIZATION'S NAME			1			1
116, INDIVIDUAL'S LAST NAME		FIRST NAME	-	MIDDLE	NAME	SUFFIX
			/	1/		
c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
		1 1	\ /	A .		
	LINFO RE 11e. TYPE OF ORGANIZATION	11f, JURISDICTION OF ORGA	NIZATION	11g. ORG	GANIZATIONAL ID #, if an	у
	GANIZATION ' BTOR			1		□NC
. ADDITIONAL SECURE	D PARTY'S or ASSIGNOR S/F	"S NAME - insert only one name	(12a or 12b)			
12a. ORGANIZATION'S NAME				١		
3		FIDOTNAME		TANDOLE.	NAME	LOUISIN
12b. INDIVIDUAL'S LAST NAME	/ /	FIRST NAME	1	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
		\ \		10		
. This FINANCING STATEMENT of	covers timber to be cut or as-extracte	d 16. Additional collateral descr	iption:			
collateral, or is filed as a fix	ture filing.					
Description of real estate:	\ . \					
	ce or parcel of land situate tion 30, Township 13 North,		/			
	&M., more particularly					
described as follows:	ceivii, more particularly					
	the Final Parcel Map					
	Ironwood Partners and					
	or record in the Office of the der on October 24, 1995 in					
	as Document No. 373418,					
Official Records.	as Bocamene 1.01.373 113,					
\	/ /					
5. Name and address of a RECOR (if Debtor does not have a record	D OWNER of above-described real estate d interest):					
Charles and Stephanie	Ward, Trustee					
119 Centerville Lane		17. Check <u>only</u> if applicable a	nd check only one bo	ox.		
Gardnerville, NV 8941	10	Debtor is a Trust or			roperty held in trust or	Decedent's Est
		18. Check only if applicable a			· · · · · · · · · · · · · · · · · · ·	-1
		Debtor is a TRANSMITTIN	IG UTILITY			
		Filed in connection with a	Manufactured-Home	Transactio	n — effective 30 years	
		[Public-Finance Tran	raction -		

FILING OFFICE COPY — UCC FINANCING STATEMENT ADDENDUM (FORM UCC1Ad) (REV. 05/22/02)