

OFFICIAL RECORD

Requested By:
MARQUIS TITLE & ESCROW INC

Douglas County - NV
Werner Christen - Recorder

Page: 1 Of 2 Fee: 22.00
BK-0805 PG-3069 RPTT: 0.00



UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
Timothy Schwader, 775-826-6172

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**Nevada State Development Corporation
6572 So. McCarran Blvd.
Reno, NV 89509**

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 Le Cygne Corporation					
OR	1b. INDIVIDUAL'S LAST NAME				
1c. MAILING ADDRESS 1663 Lucerne Street		CITY Minden	STATE NV	POSTAL CODE 89423	COUNTRY USA
1d. TAX I.D.#: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION Corporation	1f. JURISDICTION OF ORGANIZATION Nevada	1g. ORGANIZATIONAL I.D.#, if any C7774-2004	<input 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 88 Cups, Inc.					
OR	2b. INDIVIDUAL'S LAST NAME				
2c. MAILING ADDRESS 1663 Lucerne Street		CITY Minden	STATE NV	POSTAL CODE 89423	COUNTRY USA
2d. TAX I.D.#: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION Corporation	2f. JURISDICTION OF ORGANIZATION Nevada	2g. ORGANIZATIONAL I.D.#, if any C303-2004	<input 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 U.S. Small Business Administration					
OR	3b. INDIVIDUAL'S LAST NAME				
3c. MAILING ADDRESS 6572 So. McCarran Blvd		CITY Reno	STATE NV	POSTAL CODE 89509	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

All fixtures now owned or hereafter acquired, together with all replacements thereof, all attachments, accessories, parts and tools belonging thereto or for use in connection therewith. The real property to which the fixtures are affixed, or shall be affixed, is described in Item #14 attached hereto and by reference made a part hereof.

APN: 1320-30-714-003

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

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

8. OPTIONAL FILER REFERENCE DATA

SBA 765 410 4002

08845

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 Le Cygne Corporation		
OR	9b. INDIVIDUAL'S LAST NAME	
	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

THIS SPACE FOR USE OF FILING OFFICER

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	
11c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
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		<input type="checkbox"/> NONE

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

12a. ORGANIZATION'S NAME Nevada State Development Corporation						
OR	12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS 6572 So. McCarran Blvd.			CITY Reno	STATE NV	POSTAL CODE 89509	COUNTRY USA

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:

Parcel 5-N, as set forth on the Record of Survey #1 for MINDEN VILLAGE filed for record in the office of the Douglas County Recorder on November 24, 2004, in Book 1104, Page 11844, as Document No. 630285.

16. Additional collateral description:

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

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

0651505 Page: 2 OF 2 08/05/2005



BK - 0805
PG - 3070