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4:	10		
UCC FINANCING		-	
FOLLOW INSTRUCTIONS	_		
A. NAME & PHONE OF CO			
SHERRY D. OL			
B. SEND ACKNOWLEDG	MENTIO: (Name	and Address)	
CHEDDY I	OLSON	D.C	
SHERRY	,	P.G.	1
2515 KING			
CUMMING	, GEORGI	A 30040	
	•		
			C
			THE
1. DEBTOR'S EXACT FU	JLL LEGAL NAME	- insert only one debtor name (1a c	r 1b) - do not abbreviate or combine n
1a. ORGANIZATION'S NA			
LAS CAL	CORPOR	RATION	
OR 16. INDIVIDUAL'S LAST N	IAME		FIRST NAME
1c. MAILING ADDRESS			CITY
3225-A SO.		BLVD., SUITE 102	
1d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION	le. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZAT
	DEBTOR	CORPORATION	NEVADA
2. ADDITIONAL DEBTOR	'S EXACT FULL I	EGAL NAME - insert only <u>one</u> de	ebtor name (2a or 2b) - do not abbrevia
2a. ORGANIZATION'S NA	ME		/ 7
WCA EN	I EKPKIS	E5, LEC	
OR 26. INDIVIDUAL'S LAST N	IAME		FIRST NAME
2c. MAILING ADDRESS			CITY

DOC 01/24/2007 11:12 AM Deputy: GB OFFICIAL RECORD Requested By: OLSON TITLE & ESCROW LLC

> Douglas County - NV Werner Christen - Recorder

 \mathbf{Of} 3 Fee: BK-0107 PG- 7156 RPIT:

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ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FL	JLL LEGAL NAME	E - insert only <u>one</u> debtor name (1a or	1b) - do not abbreviate or combine names			V
1a. ORGANIZATION'S NA						_
_ LAS CAL	CORPO	RATION		\		
OR 16. INDIVIDUAL'S LAST N	IAME		FIRST NAME	MIDDLE N	AME	SUFFIX
				- 1	_	
1c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
3225-A SO.		BLVD., SUITE 102	The state of the s	NV.	89146	USA
1d. TAX ID #: SSN OR EIN		1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1.0	NIZATIONAL ID #, if any	
	ORGANIZATION DEBTOR	CORPORATION	NEVADA	/ C26	3-1967	NONE
2. ADDITIONAL DEBTOR	S'S EXACT FULL	LEGAL NAME - insert only one det	otor name (2a or 2b) - do not abbreviate or combir	ne names		
2a. ORGANIZATION'S NA	ME					
WCA ENT	TERPRIS	SES, LLC	_ \ /			
OR 26. INDIVIDUAL'S LAST N	NAME		FIRST NAME	MIDDLE N	AME	SUFFIX
2c. MAILING ADDRESS	7		CITY	16	POSTAL CODE	COUNTRY
3225-A SO.	RAINBOW	/ BLVD., SUITE 102	LAS VEGAS	NV	89146	USA
2d. TAX ID #: SSN OR EIN		2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	1 4	NIZATIONAL ID #, if any	
	ORGANIZATION DESTOR	LIMITED LIABILITY COMPANY	NEVADA	LLC	14113-2004	NONE
3. SECURED PARTY'S	NAME (or NAME of	of TOTAL ASSIGNEE of ASSIGNOR S	i/P) - insert only <u>one</u> secured party name (3a or 3t	0)		
3a. ORGANIZATION'S NA		\				
BANK OF	AMERIC	CA, N.A.	1 1			
OR 36. INDIVIDUAL'S LAST N	IAME		FIRST NAME	MIDDLE N	IAME	SUFFIX
		\ \	/ /			
3c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
P.O. BOX	45247		JACKSONVILLE	FL	32256-0771	USA
4. This FINANCING STATEME	NT covers the follow	ving collateral:				

Accounts: Any and all accounts and other rights of Debtor to the payment for goods sold or leased or for services rendered whether or not earned by performance, contract rights, book debts, checks, notes, drafts, instruments, chattel paper, acceptances, and any and all amounts due to Debtor from a factor or other forms of obligations and receivables, now existing or hereafter arising out of the business of Debtor;

Inventory: Any and all of Debtor's goods held as inventory located at the Collateral Location described on Exhibit "A"; Equipment: Any and all of Debtor's goods held as equipment at the Collateral Location described on Exhibit "A"; Fixtures: Any and all of Debtor's goods held as fixtures at the Collateral Location described on Exhibit "A"; Instruments and/or Investment Documents: Blanket Lien: Any and all of Debtor's instruments, documents, and other writings of any type:

General Intangibles: Blanket Lien: Any and all of Debtor's general intangible property,

08886

including all Substitutions and Proceeds and Products thereof.

5. ALTERNATIVE DESIGNATION [if appli	cable) LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG, LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to ESTATE RECORDS. Attach Add		d) in the REAL 7. Check to REQ	UEST SEARCH REPOR	RT(S) on Deblor(s)	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA		III applicable (ADD ITOTALE	T.C.L.	TO PAGE 1	<u> </u>	
1/272.6 Douglas	COUNTY					

OLLOW INSTRUCTIONS						Λ	
9. NAME OF FIRST DEB 9a. ORGANIZATION'S NA		RELATED FINANCING	STATEMENT				
LAS CAL (CORPORA	TION				\ \	
9b. INDIVIDUAL'S LAST I	NAME	FIRST NAME	MIDDLE NAME, SUF	FIX		\ \	
 D.MISCELLANEOUS;						\ \	
						\ \	
						\ \	
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. ADDITIONAL DEBTO	R'S EXACT FULL L	EGAL NAME - insert only	one name (11a or 11b) - do not ab			3 FOR FILING OFF	GE USE ONE
11a. ORGANIZATION'S N	AME				1		
11b. INDIVIDUAL'S LAST	NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
TIB. INDIVIDUAL 9 CAST	NAME		FIRST NAME		MIDDLE	VAME	SOFFIX
. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
				<u>\</u>			
TAX ID #: S\$N OR EIN	ORGANIZATION	1e. TYPE OF ORGANIZATION	11f. JURISDICTION OF OR	GANIZATION	11g. ORG	ANIZATIONAL ID #, if a	
ADDITIONAL SEC	DEBTOR	TASSIGNOR S	P'S NAME - insert only one na				NON
12a. ORGANIZATION'S N		<u>u jadoronor er</u>	1 O NAME - Insertainy one na	ine (12a or 12b)			•
12b. INDIVIDUAL'S LAST			TEIDARMANE		Lition E I		Tausen.
126. INDIVIDUAL'S LAST	NAME	/	FIRST NAME		MIDDLE	NAME	SUFFIX
. MAILING ADDRESS		1	CITY		STATE	POSTAL CODE	COUNTRY
		\	\				
This FINANCING STATEA collateral, or is filed as a		er to be cut or as-extrac	ted 16. Additional collateral de	scription;			
Description of real estate.		\					
ALL THAT R	EAL PROPI	ERTY		/			
DESCRIBED	IN EXHIBIT	Γ"Α"		/			
ATTACHED		ND MADE A	///				
PART HERE	OF.						
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		/ /				ee 1402 en 1861	BK- 010
Name and address of a Ri	ECORD OWNER of abo	ove-described real estate					PG- 715
(if Debtor does not have a					те: 2	Of 3 0	1/24/200
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	$\overline{}$		17. Check only if applicable			_	Basador Ha Franc
			Debtor is a Trust or 18. Check only if applicable		respect to pr	operty held in trust or	Decedent's Estat
			Debtoris a TRANSMITT				
			Filed in connection with				
			Filed in connection with	a Public-Finance Tra	neaction — ef	factive 30 years	

EXHIBIT "A"

All that certain Real Property situate in the County of Douglas, State of Nevada and more particularly described as follows:

A parcel of land located within a portion of the Northwest 1/4 of the Northeast 1/4 (NW 1/4 NE 1/4) of Section 4, Township 12 North, Range 20 East, Mount Diablo Meridian, Douglas County, Nevada, described as follows:

Commencing at centerline Station "A" 370+44.51 of U.S. Highway 395 per found Nevada Department of Transportation Highway right-of-way Brass Cap Monuments; thence along said centerline South 51004'00" East, per Document No. 28058, 1403.69 feet; thence North 38056'00" East, a right angle to the preceding course a distance of 40.00 feet to a point on the Northeasterly right-of-way line of U.S. 395, said point further described as the Southwesterly most corner of the property conveyed to Wayne C. Matley et ux recorded May 19, 1971 in Book 87 of Official Records at Page 109 in Douglas County, Nevada; thence along said right-of-way line South 51004'00" East, 216.85 feet to THE POINT OF BEGINNING; thence North 38°54'53" East, 190.00 feet; thence South 51004'00" East, 188.62 feet to the Northwesterly right-of-way line of Waterloo Lane; thence along said right-of-way line South 44054'36" West, 168.52 feet; thence along the arc of a curve to the right having a radius of 25.00 feet, a central angle of 84001'24" and an arc length of 36.66 feet to a point on the Northwesterly right-of-way line of U.S. Highway 395; thence along said right-of-way line North 51004'00" West, 146.15 feet to THE POINT OF BEGINNING.

Reference is hereby made to that certain Record of Survey for Smith's Food and Drug Centers, Inc., filed for record in the Douglas County Recorder's Office on September 1, 1994 in Book 994, Page 109 as Document No. 345326; Official Records.

LAS CAL UNIT NO.: 37 1331 Hwy 395 Gardnerville, Nevada 89410 Douglas County

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