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		OFFICIAL RI	ECORD		
	1	FIRST AMERICAN 🛭	TITLE HOW		
UCC FINANCING STATEMENT		Douglas Cou Karen Ellison	nty – NV – Recorder		
FOLLOW INSTRUCTIONS (front and back) CAREFULLY		Page: 1 of 2 F BK-109 PG-520 RPTT:	ee: 40.00		
A NAME & PHONE OF CONTACT AT FILER [optional] Mona Sun - 702-492-5766	<u> </u>				
B, SEND ACKNOWLEDGMENT TO: (Name and Address)					
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Mutual of Omaha Bank Mail Code: AZ-2001-115			\		
17600 North Perimeter Drive	Ì	\	\		
Scottsdale, AZ 85255	,	_	\		
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1 1001 1000 10 15 15			\		
- APN 1220-03-412-01		SPACE IS FOR FILING OFFICE US	E ONLY		
 DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1 ORGANIZATION'S NAME 	a or 1b) - do not abbreviate or combine names				
GARDNERVILLE STORAGE PARTNERS, LLC					
OR 18. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
·		\ \	1		
1c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY		
1220 Venture Drive	Gardnerville	NV 89410	USA		
1d, SEE INSTRUCTIONS ADD'L INFO RE 1s. TYPE OF ORGANIZATION ORGANIZATION LLC	11. JURISDICTION OF ORGANIZATION NV	1g. ORGANIZATIONAL ID #, if any LLC2087-2001	_		
[OLDICK			NONE		
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one [2a. ORGANIZATION'S NAME]	a deptor name (28 or 25) - do not appreviate or comp	one names	<u></u>		
OR 25. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY		
2d. SEE INSTRUCTIONS ADD'L INFO RE 2e. TYPE OF ORGANIZATION	21, JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID#, If any			
ORGANIZATION DEBTOR			NONE		
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNE	R S/P) - Insert only one secured party name (3s or :	3b)			
36. ORGANIZATION'S NAME					
Mutual Of Ornaha Bank OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	IMIDDLE NAME SUFFIX		
DE INSTRUCTION OF THE PROPERTY	FAST INNUE	INDUCE HAME	SUPPLA		
3c, MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY		
6325 S. Rainbow Blvd, Suite 100	Las Vegas	NV 89118	USA		
4. This FINANCING STATEMENT covers the following collateral:					
All Fixtures located at 1220 Venture Drive, Garnderville, NV					
accessions, additions, replacements, and substitutions relat	ing to any of the foregoing; an record	s of any kind relating to any of	the foregoing.		
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5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR COM 6. VI This FINANCING STATEMENT is to be filed (for record) (or recorded) in the RI	SIGNEE/CONSIGNOR BAILEE/BAILOR EAL 17 Check to REQUEST SEARCH REPORT	SELLER/BUYER AG. LIEN	NON-UCC FILING		
This FINANCING STATEMENT is to be filed (for record) (or recorded) in the RI ESTATE RECORDS. Attack Addendum This FINANCING STATEMENT IS TO PROVIDE THE PROVIDENCE OF	EAL 7. Check to REQUEST SEARCH REPORT [ADDITIONAL FEE]	optional) Ali Debtors	Debtor 1 Debtor 2		
1320238001					

	C FINANCING		•				Į.		/	\
FOLLOW INSTRUCTIONS (front and back) CAREFULLY							┫			\
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT 9a. ORGANIZATION'S NAME						4		\	\	
	GARDNERVILLE STORAGE PARTNERS, LLC								\	
OR					Luce	1 = 1141 10 01 1001	.]		\	\
	86. INDIVIDUAL'S LAST NA	AME	FIRST NA	ME	. MIDE	LE NAME, SUFFI	1		1	\
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11d.	SEE INSTRUCTIONS	ORGANIZATION	111e. TYPE C	F ORGANIZATION	į 11f. JURIS	DICTION OF ORG	ANIZATION	F 11g. OR	GANIZATIONAL ID 1	f, il any
		DEBTOR	1		1		\setminus \subset	_1		NONE
12.	ADDITIONAL SECT	URED PARTY	'S or A	SSIGNOR S/P'S	NAME -I	nsert only <u>one</u> nam	ne (12a or 12b)	V .		
	12a. ORGANIZATION'S NA	AME	7		The same of the sa		1	1		
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OR	12b. INDIVIDUAL'S LAST	NAME	+-+		FIRST NAM	WE :		MIDDLE	MAME	SUFFIX
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125.	WAILING ADDRESS	1			CITY	\	\	STATE	POSTAL CODE	COUNTRY
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	This FINANCING STATEME		riber to be cut i	or as extracted	16. Additio	onal collateral desc	ription:			
	collateral, or is filed as a	future filing.	1 1		Ì)				
14.	Description of real estate:		1	N	·	- /				
P/	ARCEL A:		1.7	N	ì		/			
P/	ARCEL 2 AS SHOW	N ON THE PA	ARCEL MA	P FOR MARRY	1		/			
TE	DSEN FILED FOR F	RECORD IN B	OOK 990	AT PAGE 244	1 '	and the same of th	/			
	DOCUMENT NUM		, OFFICIAL	RECORDS OF			r.			
D	JUGLAS COUNTY,	NEVADA.		The same of the sa		and the same of th				
P#	RCEL B:			The state of the s	1	The second secon				
1.0	TS 9 AND 10 IN	BLOCK "A	" AS SHO	OWN ON THE						
- Öl	FICIAL MAP OF	SOUTHGATE	SERVICE	PARK TWO,	}			,		
	ED FOR RECORD									
	CUMENT NUMBER OUGLAS COUNTY,		OFFICIAL	RECORDS OF						
٠,	704EX3 000M11,	TEVADA.		/ /	1					
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				/ /						
15.	Name and address of a RE	CORD OWNER of	above describ	ed real estate		-				
	(if Debtor does not have a m	ecord interest):	and the same of th		1					
					1					
				45						
BK-109					1	=	ind check <u>only</u> and b			П
					Debtor is a		Trustee ecting with re		operty held in trust	or Decedent's Estate
					18. Check	only if applicable a	ind check <u>only</u> one b	ox.		·········
PG-521				Debtor	is a TRANSMITTIN	IG UTILITY				
,	735368 Page:		01/06/2	009	Flied In	connection with a	Manufactured-Home	Transaction	n - effective 30 years	:
	_				I Blad is		Oublic Cinence Tenn		•	