

DOC # 794697
12/22/2011 01:41PM Deputy: GB
OFFICIAL RECORD

Requested By:
Ticor Title - Reno (Commer
Douglas County - NV
Karen Ellison - Recorder
Page: 1 of 5 Fee: \$90.00
BK-1211 PG-4906 RPTT: 0.00



APN #: 1320-07-801-011

Escrow No.: 01109482-CD

RECORDING REQUESTED BY:
Nevada State Development Corporation
6572 S. McCarran Blvd.
Reno, Nevada 89509

WHEN RECORDED MAIL TO:
Nevada State Development Corporation
6572 S. McCarran Blvd.
Reno, Nevada 89509

Escrow No. 01109482-CD

FOR RECORDER'S USE ONLY

UCC FINANCING STATEMENT

Title of Document

Please complete Affirmation Statement below:

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons. (Per NRS 239B.030)

THIS DOCUMENT IS BEING RE-RECORDED TO REFLECT CORRECT APN

Shelly Saltz
Signature

Commercial Title Officer

Title

Shelly Saltz
Print Signature

This page is added to provide additional information required by NRS 111.312 Sections 1-2 and NRS 239B.030 Section 4.

This cover page must be typed or printed in black ink.

(Additional recording fees applies)

DOC # 794541
12/20/2011 10:55AM Deputy: PK
OFFICIAL RECORD
Requested By:
Ticor Title - Reno (Commer
Douglas County - NV
Karen Ellison - Recorder
Page: 1 of 3 Fee: \$90.00
BK-1211 PG-4232 RPTT: 0.00



A.P.N. #	1320-07-801-001 011
Escrow No.	
Recording Requested By:	
Nevada State Development Corporation 6572 S McCarran Blvd. Reno, NV 89509	
When Recorded Mail To:	
Nevada State Development Corporation 6572 S. McCarran Blvd. Reno, NV 89509	
(for recorders use only)	

01109482-00

UCC Financing Statement
(Title of Document)

Please complete Affirmation Statement below:

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons. (Per NRS 239B.030)


Stephanie Morris, Reno Closing Manager
Nevada State Development Corporation

This page added to provide additional information required by NRS 111.312 Sections 1-2 and NRS 239B.030 Section 4.

This cover page must be typed or printed in black ink.

(Additional recording fee applies)

This document is being re-recorded to reflect correct APN 1320-07-801-011.



A.P.N. #	1320-07-801- 001 011
Escrow No.	
Recording Requested By:	
Nevada State Development Corporation 6572 S McCarran Blvd. Reno, NV 89509	
When Recorded Mail To:	
Nevada State Development Corporation 6572 S. McCarran Blvd. Reno, NV 89509	

Recorded Electronically
 ID 794697
 County Douglas
 Date 12/20/2011 Time 10:55 AM
 Simplifile.com 800.460.5657

(for recorders use only)

01109482-UD

UCC Financing Statement

(Title of Document)

Please complete Affirmation Statement below:

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons. (Per NRS 239B.030)

Stephanie Morris, Reno Closing Manager
Nevada State Development Corporation

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This cover page must be typed or printed in black ink.

(Additional recording fee applies)



UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Stephanie Morris 775-770-1206	
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 Ray-Matt, LLC					
OR	1b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 901 Airport Road		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 LLC	1f. JURISDICTION OF ORGANIZATION Nevada	1g. ORGANIZATIONAL I.D.#, if any LLC12096-2002 <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					
OR	2b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2d. TAX I.D.#:	SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL I.D.#, if any <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				
	FIRST NAME	MIDDLE NAME	SUFFIX		
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 acquired with loan proceeds, including all replacements and substitutions thereof, all attachments, accessories, parts and tools belonging thereto or for use in connection therewith, wherever located. The real property to which the fixtures are affixed, or shall be affixed, is described on Exhibit "A" attached hereto and by reference made a part hereof.

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) All Debtors Debtor 1 Debtor 2 (ADDITIONAL FEE) [optional]

8. OPTIONAL FILER REFERENCE DATA

4892965000



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 Ray-Matt, LLC		
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:

All that certain real property situate in the County of Douglas, State of Nevada, described as follows:

Parcel 4-A-1, as set forth on that certain Parcel Map LDA #04-060 for Duncan M. and Mary S. Getty, recorded April 1, 2005, in Book 405, Page 438, as Document No. 460704, Official Records of Douglas County, Nevada.

APN: 1320-07-801-011

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

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