		DOUGLAS COUN Rec:\$90.00 \$90.00 Pgs: FIRST CENTENN KAREN ELLISON	=4 <b>10/09</b> / IAL - RENO (MAIN	018-920638 /2018 01:51 PM OFFICE)
UCC FINANCING STATEMEN FOLLOW INSTRUCTIONS	NT			
A. NAME & PHONE OF CONTACT AT FILER	(optional)		\ \	
B. E-MAIL CONTACT AT FILER (optional)			\	\
C. SEND ACKNOWLEDGMENT TO: (Name	and Address)	~	\	\
Robert S. Hardy, Trustee c/o Evergreen Note Servicing 1621 Lakeside Drive, Suite 15				
Reno, NV 89511				
Reno, NV 89511	THE	ABOVE SPACE IS FOR		
Reno, NV 89511  1. DEBTOR'S NAME: Provide only one Debtor name will not fit in line 1b, leave all of item 1 blant	THE name (1a or 1b) (use exact, full name; do not omit, modify, or abbre	viate any part of the Debtor's	name); if any part of the fr	ndividual Debtor's
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Reno, NV 89511  1. DEBTOR'S NAME: Provide only one Debtor name will not fit in line 1b, leave all of item 1 blant OP DEVELOPMENT, IN 1b, INDIVIDUAL'S SURNAME  1c. MAILING ADDRESS P.O. Box 2065  2. DEBTOR'S NAME. Provide only one Debtor	THE name (1a or 1b) (use exact, full name; do not omit, modify, or abbreix, check here and provide the Individual Debter Information in IC.  FIRST PERSONAL NAME  CITY  Merced  The name (2a or 2b) (use exact, full name; do not omit, modify, or abbreix)	viate any part of the Debtor's term 10 of the Financing State ADDITION STATE CA	name); if any part of the frement Addendum (Form U  AL NAME(S)/INITIAL(S)  POSTAL CODE  95344  name); if any part of the li	SUFFIX COUNTRY USA
Reno, NV 89511  1. DEBTOR'S NAME: Provide only one Debtor name will not fit in line 1b, leave all of item 1 blant OP DEVELOPMENT, IN 1b, INDIVIDUAL'S SURNAME  1c. MAILING ADDRESS P.O. Box 2065  2. DEBTOR'S NAME. Provide only one Debtor	THE  name (1a or 1b) (use exact, full name; do not omit, modify, or abbreix, check here and provide the Individual Debter Information in IC.  FIRST PERSONAL NAME  CITY  Merced	viate any part of the Debtor's term 10 of the Financing State ADDITION STATE CA	name); if any part of the frement Addendum (Form U  AL NAME(S)/INITIAL(S)  POSTAL CODE  95344  name); if any part of the li	SUFFIX COUNTRY USA
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4. COLLATERAL: This financing statement covers the following collaterat:

1621 Lakeside Drive, Suite 150

36 INDIVIDUAL'S SURNAME

3c MAILING ADDRESS

The Hardy Community Property Trust u/a/d 02/01/1999

All Debtor's personal property, construction materials, furniture, fixtures, inventory and equipment located on the premises described on Exhibit A attached hereto and incorporated herein by this reference ("Premises") including all plans and permits related to the property in addition to all rights and entitlements appurtenant to the property, including but not limited to all plans, approvals and permits to construct (the "Entitlements").

CITY

Reno

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5. Check only if applicable and ch	eck <u>only</u> one box: Co	lateral is he'd in a Tr	ust (see UCC1Ad, Item 17 and I	Instructions}	being administered by a Dece	dent's Personal Representative
6a. Check only if applicable and o	heck galy one bax.				6b. Check <u>only</u> if applicable as	nd check only one box
Public-Finance Transacti	on Manufa	ctured-Home Transaction	A Debtor is a Transm	nitting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATIVE DESIGNATION	(if applicable):	Lessee/Lessor [	Consignee/Consignor	Seller/Buye	r Bailee/Bailor	Licensea/Licensor
8. OPTIONAL FILER REFERI	ENCE DATA:					

ADDITIONAL NAME(SYINITIAL(S)

POSTAL CODE

89511

STATE

NV

SUFFIX

COUNTRY

USA

LOW INSTRUCTIONS				1	1
AME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if i	ine 1b was left blank			\	\
93. ORGANIZATION'S NAME OP DEVELOPMENT, INC.		~		\	\
95. INDIVIDUAL'S SURNAME					. \
FIRST PERSONAL NAME					
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE	SPACE I	s FOR FILING OFFI	CE USE ONLY
		ne 1b or 2b of the Fi	nancing S	tatement (Form UCC1)	(use exact, full nar
10a. ORGANIZATION'S NAME					
10b. INDIVIDUAL'S SURNAME			7		***************************************
INDIVIDUAL'S FIRST PERSONAL NAME			$\mathcal{T}$		**************************************
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)		~_/		·····	SUFFIX
MAILING ADDRESS	CITY	-	STATE	POSTAL CODE	COUNTR
	OR SECURED PARTY'S	NAME: Provide o	nly <u>one</u> na	ime (11a or 11b)	
11a. ORGANIZATION'S NAME				>	
11b INDIVIDUAL'S SURNAME Hardy	FIRST PERSONAL NAME  Robert		S.	NAL NAME(SYINITIAL(	S) SUFFIX
	Reno		STATE	POSTAL CODE 89511	COUNTR
ADDITIONAL SPACE FOR ITEM 4 (Collateral)					
This FINANCING STATEMENT is to be filed for record) (or recorded) in the REAL ESTATE RECORDS (if applicable)	ļ ,,		extracted	co®ateral  is filed	as a fixture filing
			and in	ncorporated he	rein by this
	Pa. ORGANIZATION'S NAME OP DEVELOPMENT, INC.  8b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINITIAL(S)  DEBTOR'S NAME: Provide (10a or 10b) only gas additional Debtor name or do not omit, modify, or abbreviate any part of the Debtor's name) and enter the m 10a. ORGANIZATION'S NAME INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)  MAILING ADDRESS  ADDITIONAL SECURED PARTY'S NAME of ASSIGN(11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME 11b. INDIVIDUAL'S SURNAME 11b. ORGANIZATION'S NAME 11c. ORGANIZATION'S NAME Hardy MAILING ADDRESS  621 Lakside Drive, Suite 150  ADDITIONAL SPACE FOR ITEM 4 (Collateral)	SUFFIX  SUFFIX  SUFFIX  BB. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  ADDITIONAL NAME(S)INITIAL(S)  SUFFIX  DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fill in it do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c  10a. ORGANIZATION'S NAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S SURNAME  ITID INDIVIDUAL'S SURNAME  THE INDIVIDUAL'S SURNAME  THE INDIVIDUAL'S SURNAME  THE INDIVIDUAL'S SURNAME  ANALING ADDRESS  CITY  MAILING ADDRESS  CITY  MAILING ADDRESS  CITY  ASSIGNOR SECURED PARTY'S  THIS FINANCING STATEMENT is to be filed flor record) (or recorded) in the latency of the part of the	DEBTOR'S NAME  FIRST PERSONAL NAME  ADDITIONAL NAME(S)/INITIAL(S)  DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fill inline to or 25 oil the Fid one to mit, modify, or abbrevate any part of the Debtor's name) and enter the mailing address in line 10c  10a. ORGANIZATION'S NAME  INDIVIDUAL'S SURNAME  INDIVIDUAL'S SURNAME  INDIVIDUAL'S SURNAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  MAILING ADDRESS  CITY  ADDITIONAL SECURED PARTY'S NAME  IT ORGANIZATION'S NAME  IT ORGANIZATION	PROPOSED A CONTROL NAME  THE ABOVE SPACE I  THE ABOVE SPACE II  THE ABOVE SPACE	PIRST PERSONAL NAME  ADDITIONAL NAME(SylINITIAL(S)  DEBTOR'S NAME: Provide (10a or 10b) only orga additional Debtor name or Debtor name that did notified him to 12b dithe Financing Statement (Form UCC1) do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10b or 2b dithe Financing Statement (Form UCC1) do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10b  OBJORIANIZATION'S NAME  INDIVIDUAL'S SURRAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)  MAILING ADDRESS  OITY  ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only organization (11a or 11b)  The RONVIDUAL'S SURNAME  ROBert  S.  MAILING ADDRESS  OITY  STATE  POSTAL CODE  ADDITIONAL SECURED PARTY'S NAME or The POSTAL CODE  OITY  STATE  POSTAL CODE  NV 89511  This FINANCING STATEMENT is to be fined for record; for recorded; in the 10h or 2b or covers as estracted collateral is fined to be cut covers as estracted collateral is fined Name and address of a RECORD OWNER of real estate disscribed in item 16  Nome and address of a RECORD OWNER of real estate disscribed in item 16  Nome and address of a RECORD OWNER of real estate disscribed in item 16  Nome and address of a RECORD OWNER of real estate disscribed in item 16  Nome and address of a RECORD OWNER of real estate disscribed in item 16  Nome and address of a RECORD OWNER of real estate disscribed in item 16  Sec Exhibit "A" attached hereto and incorporated here

## UCC FINANCING STATEMENT ADDITIONAL PARTY **FOLLOW INSTRUCTIONS** 18. NAME OF FIRST DEBTOR: Same as line to or 1b on Financing Statement; if line 1b was left blank because individual Debtor name did not lit, check here 18a. ORGANIZATION'S NAME OP DEVELOPMENT, INC. 18b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 19. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (19a or 19b) (use exact, full name, do not omit, modify or abbreviate any part of the Debtor's name) 19a, ORGANIZATIONS NAME 19b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 19c. MAILING ADDRESS STATE POSTAL CODE COUNTRY 20. ADDITIONAL DEBTOR'S NAME Provide only one Debtor name (20a or 20b) (use exact, full name; do not omit modify, or abbreviate any part of the Debtor's name) 20a. ORGANIZATION'S NAME OR 20b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 20c. MAILING ADDRESS POSTAL CODE COUNTRY 21. ADDITIONAL DEBTOR'S NAME Provide only one Debtor name (21a or 21b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) 21a, ORGANIZATIONS NAME OR 216 INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 21c. MAILING ADDRESS STATE POSTAL CODE COUNTRY CITY 22. ADDITIONAL SECURED PARTY'S NAME of ASSIGNOR SECURED PARTY'S NAME: Provide only gine name (22a or 22b) 22a. ORGANIZATION'S NAME OR 226. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX HARDY LANA M. 22c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 1621 Lakeside Drive, Suite 150 NV 89511 **USA** Reno ADDITIONAL SECURED PARTY'S NAME OF ASSIGNOR SECURED PARTY'S NAME: Provide only one name (23s or 23b) 23a. DRGANIZATION'S NAME OR 236 INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 23c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 24. MISCELLANEOUS:

## EXHIBIT "A" Legal Description

## Parcel No. 1:

Lot 35, as set forth on the Seventh Amended Map of Uppaway Subdivisioin. recorded November 29, 1982, in Book 1182, Page 1259, Official Records of Douglas County, Nevada, as Document No. 73522.

## Parcel No. 2:

Those certain exclusive perpetual use easements set forth in document, recorded July 27, 1990 in Book 790, Page 3978, as Document No. 231122, Douglas County, Nevada.

APN: 1418-15-110-017

Order Number: 00236422