| | D | OC# | 228 1 03:2 | 795 |
|--|--|--|---|---|
| | Of | fici | al Rec | |
| | | ited By RT TITLE | ELKO | |
| | 2.2 | | a County | - NV |
| JCC FINANCING STATEMENT OLLOW INSTRUCTIONS | | Rebale | ati - Reco | rder 60.00 |
| A. NAME & PHONE OF CONTACT AT FILER (optional) | Record | ied By LH | RPTT: | \$0.00 |
| Stephanie Morris | Book- | 0575 Pag | je- 0149 | \ |
| B. EMAIL CONTACT AT FILER (optional) Smorris@nsdc.com | | | ###################################### | II \ |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |] | | \ |
| Nevada State Development Corpora | tion 7 0228 | 795 | | n / |
| 6572 So. McCarran Blvd. | | | | |
| Reno, NV 89509 | | The same of the sa | | 1 |
| 1 2100 | / _ | | | 1 |
| DEBTOR'S NAME: Provide only good Debtor name (1a or 1b) (use example) | | | S FOR FILING OFFICE | |
| mame will not fit in line 15,988/9/ all of item 1 blank, check here and | d provide the Individual Debiar information in item 10 of t | | | - |
| 18. ORGANIZATION'S NAME | 7 7 | | | |
| McKay Minoletti LLC | | - | | Lauren |
| 16. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIO | nal name(syinitial(s) | SUFFIX |
| C MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| 50 N. Main Street | Eureka | NV | 89316 | USA |
| DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact | | | | |
| c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | |
| | | | | |
| | Eureka | NV | 1.2 | COUNTRY |
| 60 N. Main St. | Eureka | NV | 89316 | USA |
| 60 N. Main St. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SI 39. ORGANIZATION'S NAME | EUreka ECUREO PARTY): Provide only one Secured Party nan | NV | 1.2 | |
| 60 N. Main St. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR'S) 30. ORGANIZATION'S NAME U.S. Small Business Administration | Eureka ECURED PARTY): Provide only one Secured Party ner N | NV ne (3a or 3b) | 89316 | USA |
| 60 N. Main St. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SI 34. ORGANIZATION'S NAME 11 S. Small Business Administration | EUreka ECUREO PARTY): Provide only one Secured Party nan | NV ne (3a or 3b) | 1.2 | |
| 30 N. Main St. SECURED PARTY'S NAME (IC NAME OF ASSIGNEE OF ASSIGNOR'S) 30. ORGANIZATION'S NAME U.S. Small Business Administratio 30. INDIVIDUAL'S SURNAME | Eureka ECURED PARTY): Provide only one Secured Party ner N | NV ne (3a or 3b) | 89316 | USA |
| SECURED PARTY'S NAME (IX NAME of ASSIGNEE OF ASSIGNOR SI SECURED PARTY'S NAME (IX NAME of ASSIGNEE OF ASSIGNOR SI SO, ORGANIZATION'S NAME U.S. Small Business Administration BUSINDIVIDUAL'S SURNAME MAILING ADDRESS 6572 So, McCarran Bivd | EUreka ECURED PARTY): Provide only one Secured Party near PRST PERSONAL NAME | NV ne (3a or 3b) ADDITION | 89316 IAL NAME(S)/INITIAL(S) | SUFFIX |
| SECURED PARTY'S NAME (OF NAME OF ASSIGNEE OF ASSIGNOR SITE OF ASSIGNOR SIT | Eureka ECURED PARTY): Provide only one Secured Party near PREST PERSONAL NAME CITY Reno In proceeds, including power-drive or hereafter acquired, together acquired toget | ADDITION STATE NV wen machin with all rep ction there need as par | POSTAL CODE 89509 ery and blacements there with, wherever let | SUFFIX COUNTRY USA of, all ocated, to. |
| SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SI 3a, ORGANIZATION'S NAME U.S. Small Business Administration 3b, INDIVIDUAL'S SURNAME c. MAILING ADDRESS 6572 So. McCarran Blvd Collateral: This financing statement covers the following collateral All equipment and fixtures, acquired with loan quipment, furniture and fixtures now owned ttachments, accessories, parts and tools belon ogether with any other personal property gen 069835004. The real property to which the fi and by reference made a part thereof. | EURED PARTY): Provide only one Secured Parly near PREST PERSONAL NAME CITY Reno In proceeds, including power-driv or hereafter acquired, together reging thereto or for use in connecerally described above and final actures are affixed, or shall be af | ADDITION STATE NV wen machin with all rep ction there nced as par fixed, is de | AL NAME(S)/INITIAL(S) POSTAL CODE 89509 Mery and Placements there with, wherever let of SBA Loan N scribed in Item # | SUFFIX COUNTRY USA of, all ocated, to. |
| SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SI 3a. ORGANIZATION'S NAME U.S. Small Business Administration 3b. INDIVIDUAL'S SURNAME A COLLATERAL This financing statement covers the following collateral and fixtures, acquired with loar equipment, furniture and fixtures now owned attachments, accessories, parts and tools belon ogether with any other personal property gen (169835004. The real property to which the fixed by reference made a part thereof. | EURED PARTY): Provide only one Secured Parly near PREST PERSONAL NAME CITY Reno In proceeds, including power-driver or hereafter acquired, together acquired, together acquired above and final actures are affixed, or shall be affected above. | ADDITION STATE NV Wen machin with all rep ction there nced as par fixed, is de | AL NAME(SUINITIAL(S) POSTAL CODE 89509 ery and blacements there with, wherever in t of SBA Loan N scribed in Item # | SUFFIX COUNTRY USA of, all ocated, to. |
| 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SI 3. ORGANIZATION'S NAME U.S. Small Business Administration 3. INDIVIDUAL'S SURNAME C. MAILING ADDRESS 6572 So. McCarran Blvd G. GOLLATERAL' This financing statement covers the following collateral and fixtures, acquired with load equipment, furniture and fixtures now owned attachments, accessories, parts and tools belone ogether with any other personal property gen (7069835004. The real property to which the fixed by reference made a part thereof. | EURED PARTY): Provide only one Secured Parly near PREST PERSONAL NAME CITY Reno In proceeds, including power-driver or hereafter acquired, together acquired, together acquired above and final actures are affixed, or shall be affected above. | ADDITION STATE NV Wen machin with all rep ction there nced as par fixed, is de | AL NAME(S)/INITIAL(S) POSTAL CODE 89509 Mery and Placements there with, wherever let of SBA Loan N scribed in Item # | SUFFIX COUNTRY USA of, all ocated, to. |
| Secured Party's Name (or Name of Assignee of Assignor Si 3a. Organization's name U.S. Small Business Administratio 3b. INDIVIDUAL'S SURNAME C. MAILING ADDRESS 6572 So. McCarran Bivd 3c. Collateral. This financing statement covers the following collateral All equipment and fixtures, acquired with loan equipments, furniture and fixtures now owned attachments, accessories, parts and tools belon ogether with any other personal property gen 7069835004. The real property to which the fi and by reference made a part thereof. Check cany of applicable and check opty one box: Collateral is hold in a 3c. Check cany of applicable and check opty one box: Public-Finance Transaction Manufactured-Home Transaction A | EURED PARTY): Provide only one Secured Party near PREST PERSONAL NAME CITY Reno In proceeds, including power-driven a proceeds, including power-driven are affired, together acquired, together acquired above and final actures are affixed, or shall be affixed as a Trust (see UCC1Ad, term 17 and instructions) The provide only one Secured Party near the process of the party of t | ADDITION STATE NV Wen machin with all repetion there niced as partixed, is des | AL NAME(SJINITIAL(S) POSTAL CODE 89509 ery and blacements there with, wherever in t of SBA Loan N scribed in Item # | SUFFIX COUNTRY USA of, all ocated, to. 116 |

| UCC FINANCING STATEMENT ADDENDUM OLLOW INSTRUCTIONS | | } | | |
|--|--|--|---|--------------------------|
| DELOW NS IROC TONS NAME OF FIRST DEBTOR: Same as line 1s or 1b on Financing Statement; if line 1b was teft blank because individual Debtor name did not fit, check hare | | 7 | Λ | |
| Pa. ORGANIZATION'S NAME | | 4 | /\ | |
| McKay Minoletti LLC | | | \ \ | \ |
| 96. INDIVIDUAL'S SURNAME | | - | \ | \ |
| FIRST PERSONAL NAME | | 1 | \ | \ |
| ADDITIONAL NAME(SYINITIAL(S) | SUFFIX | THIS SPACE FOR | USE OF FILING OF | FICE USE O |
| DEBTOR'S NAME: Provide (10s or 10b) only one additional do not onlit, modify, or abbreviate any part of the Debtor's name) and | Debtor name or Debtor name that did not fi enter the muting address in line 10c | | | |
| 10a. ORGANIZATION'S NAME | _ | | | _ \ |
| 105, INDIVIDUAL'S SURNAME | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | | 11 | | |
| INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S) | / / | | | SUFFIX |
| MAILING ADDRESS | спу | STATE | POSTAL CODE | COUNTRY |
| ADDITIONAL SECURED PARTY'S NAME of X ASS | SIGNOR SECURED PARTY'S NAME | - provide only one name (1 | 1a or 11b) | <u> </u> |
| 11s. ORGANIZATION'S NAME Nevada State Development Corpo | | | | |
| 11b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITION | IAL NAME(S)/INITIAL(S) | SUFFIX |
| MAILING ADDRESS | СІТУ | STATE | POSTAL CODE | COUNTRY |
| 72 So. McCarran Blvd. | Reno | INV | 89509 | USA |
| ADDITIONAL SPACE FOR ITEM 4 (Collateral): | | | _ | |
| / / | / / | | > | |
| | \ \ | $\overline{}$ | , | |
| \ \ | \ | \ | | |
| This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. [if applicable | 14. This FINANCING STATEMEN | as extracted collateral | Is filed as a fix | ture filing |
| Name and address of a RECORD OWNER of above-described real estat in item 16 (if Debtor does not have a record interest) | The land referred to herein | is situated in the State | of Nevada, County | of Eureka, |
| | described as follows: | r | | |
| | Lots 4, 5, 6 and 7, in Block of Nevada. EXCEPTING TH material which is or may be | EREFROM all uranium determined to be pecu | i, thorium, or any of iliarly essential to t | her he |
| | productions of fissionable in Patent recorded Decemb Eureka County, Nevada. | | | |
| | | | | |
| Aiscellaneous: | | | | |
| FILING OFFICE COPY - UCC FINANCING STATEM | ENT ADDENDUM (FORM UCC1Ad) | (REV. 04/20/11) | Anchor Commercial Servi 5060 Surafae Viste Dr. St Citrus Heights, CA 9561 | ces (800) 359. e 2160 |