3203278 BK 7388 PG 1563 E 3203278 B 7388 P 1563-1565
RICHARD T. MAUGHAN
DAVIS COUNTY, UTAH RECORDER
11/13/2019 3:04:00 PM
FEE \$40.00 Pgs: 3
DEP eCASH REC'D FOR COTTONWOOD TITLE IN

_	C FINANCING STATEMENT						
_	LOW INSTRUCTIONS						
	NAME & PHONE OF CONTACT AT FILER (optional)						
	RA STUFLICK (320) 650-1365						
	E-MAIL CONTACT AT FILER (optional)  RAS@STEARNSBANK.COM						
_	SEND ACKNOWLEDGMENT TO: (Name and Address)						
٠.	— (Name and Address)						
	STEARNS BANK NATIONAL ASSOCIATION 4191 SO 2ND ST						
	ST CLOUD, MN 56302-7338	_ <u>~</u>					
l	CT-117474-CAF -TIN 12-001-0132		THE ABOVE SP	ACE IS FO	OR FILING OFFICE USE	ONLY	
1. C	EBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full rame will not fit in line 1b, leave all of item 1 blank, check here and provide to	name; do not omit, the Individual Debt	modify, or abbreviate any part or information in item 10 of the	of the Debto Financing St	r's name); if any part of the atement Addendum (Form I	Individual Debtor's JCC1Ad)	
	1a. ORGANIZATION'S NAME  JF CLEARFIELD, LLC						
OR	16. INDIVIDUAL'S SURNAME	FIRST PERSONA	NAME	ADDITIO	NAL NAME(S)INITIAL(S)	SUFFIX	
	The state of the s	PINOTPENSOR	E INME	Abbillo	INAL INAME(S)INITIAL(S)	SOFFIX	
1c.	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
11	48 W LEGACY CROSSING BLVD #400	CENTERVIL	LE	UT	84017	USA	
2 [	EBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full or						
or.	2a. ORGANIZATION'S NAME  2b. INDIVIDUAL'S SURNAME    FIRST PERSONAL NAME   ADDITIONAL NAME(SYINITIAL(S)   SUFFIX						
2c.	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
3. S	ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	RED PARTY): Pro	vide only one Secured Party na	me (3a or 3t	)		
	38. ORGANIZATION'S NAME STEARNS BANK NATIONAL ASSOCIATION				· · · · · ·		
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	ADDITIONAL NAME(S)INITIAL(S) SUFFIX		
3c. l	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
41	91 SO 2ND ST, PO BOX 7338	ST CLOUD		MN	56302	USA	
4. C	91 SO 2ND ST, PO BOX 7338  OLLATERAL: This financing statement covers the following collateral:  Fixtures; whether any of the foregoing is owned now or according of the foregoing; all records of any kind relating to any	ST CLOUD		MN	56302	USA	
to	any of the foregoing; all records of any kind relating to any	of the forego	ng.				
	neck only if applicable and check only one box: Collateral is 7 held in a Trust (s	on LICCAAA ita	17 and Instructions) being	no administra	and by a Donator's Do	al Bancon de	
_	Theid with a Trust (start only one box:	see occano, nem			red by a Decedent's Person f applicable and check only		
	Public-Finance Transaction Manufactured-Home Transaction	A Debtor is -	Transmitting Utility		ural Lien Non-UCC		
3. O	TERNATIVE DESIGNATION (in applicable): Cessee-Cessor CP	Consignee/Consign	or Seller/Buyer		lee/Ballor Lice	nsee/Licensor	

## UCC FINANCING STATEMENT ADDENDUM **FOLLOW INSTRUCTIONS** 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME JF CLEARFIELD, LLC 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10s or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10s. ORGANIZATION'S NAME OR 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(\$)INITIAL(\$) SUFFIX 10c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable) 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral X is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: EXHIBIT A.

17. MISCELLANEOUS:

File No. 117676-CAF.

## EXHIBIT A PROPERTY DESCRIPTION

Beginning on the North line of a street at a point 270.0 (record 275) feet East and 33.0 feet North of the West quarter corner of Section 1, Township 4 North, Range 2 West, Salt Lake Meridian, in the City of Clearfield and running thence North 256.6 (record 257) feet; thence South 89°42' East 206.53 feet, more or less, to the Westerly line of a highway, 50.0 feet perpendicularly distant Southwesterly from the center line thereof; thence South 37°26' East 324.0 feet, more or less, along said highway to the North line of said street; thence West 405.0 (record 400) feet, more or less, along said street to the point of beginning.

Also described by Davis County records as follows:

A parcel of land situated in the Southwest quarter of the Northwest quarter of Section 1, Township 4 North, Range 2 West, Salt Lake Base and Meridian. The boundaries of said parcel of land are described as follows:

Beginning on the North right of way line of 2nd South Street in Clearfield, Utah, at a point 275 feet East and 33.0 feet North from the West quarter corner of said Section 1; thence East 400 feet, more or less, along said right of way line to a point 50.0 feet perpendicularly distant Southwesterly from the center line of survey of highway known as Project No. 114-C; thence North 37°26' West 324 feet, more or less, to the North boundary line of said parcel of land; thence North 89°42' West 206.53 feet; thence South 257 feet, more or less, to the point of beginning.

Tax Id No.: 12-001-0132