

**UCC FINANCING STATEMENT**  
FOLLOW INSTRUCTIONS



\*W2652634\*

EH 2652634 PG 1 OF 2  
ERNEST D ROWLEY, WEBER COUNTY RECORDER  
27-AUG-13 1200 AM FEE \$12.00 DEF SGC  
REC FOR: CT LIEN SOLUTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141	
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@woitersklower.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8621 - WFB-SBA-MINNEAPOLIS-	
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	39524789  UTUT FIXTURE

File with: Weber, UT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor Information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME ELTON INVESTMENTS, LLC				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)(INITIAL(S))	SUFFIX
1c. MAILING ADDRESS 3925 S Wall Ave		CITY Ogden	STATE UT	POSTAL CODE 84405
				COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor Information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)(INITIAL(S))	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME Wells Fargo Bank, National Association				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)(INITIAL(S))	SUFFIX
3c. MAILING ADDRESS 1455 W. Lake Street, Suite 306		CITY Minneapolis	STATE MN	POSTAL CODE 55408
				COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

All Fixtures; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles, and other accounts proceeds).

5. Check only if applicable and check only one box: Collateral is  held in a Trust (see UCC1Ad, Item 17 and Instructions)  being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:  
 Public-Finance Transaction  Manufactured-Home Transaction  A Debtor Is a Transmitting Utility

6b. Check only if applicable and check only one box:  
 Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:  
39524789

1433794098

**UCC FINANCING STATEMENT ADDENDUM**  
FOLLOW INSTRUCTIONS

EH 2652634 PG 2 OF 2

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  
ELTON INVESTMENTS, LLC

OR

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 (10a 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.

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

10c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

11.  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):

13.  This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable)

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):  
Elton Investments Bountiful LLC  
3925 Wall Ave  
Ogden, UT 84403

14. This FINANCING STATEMENT:

covers timber to be cut  covers as-extracted collateral  is filed as a fixture filing

16. Description of real estate:

PART OF LOTS 2 TO 5, INCLUSIVE, BLOCK 2, BURCH ADDITION, SOUTH OGDEN CITY, WEBER COUNTY, UTAH: BEGINNING 60.15 FEET SOUTH 0D58' WEST FROM THE NORTHWEST CORNER OF LOT 1, RUNNING THENCE SOUTH 84D07' EAST 137.40 FEET; THENCE SOUTH 3D26' WEST 102.4 FEET; THENCE SOUTH 3D34' EAST 49.6 FEET; THENCE NORTH 83D42'30" WEST 132.62 FEET; THENCE NORTH 0D58' EAST 151.06 FEET TO THE POINT OF BEGINNING. SUBJECT TO PERPETUAL EASEMENT (621-183).

05-140-0012 ✓

17. MISCELLANEOUS: 39624789-UT-57 8621 - WFB-SBA-MINNEAPOLIS-

Wells Fargo Bank, National Association File with: Weber, UT

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