

10-7239417822

07/22/2010 17:00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

PAM K MUSTAIN, PUBLIC NOTARY  
P.O. BOX 336  
LA GRANGE, CA, 95329



FILED  
CALIFORNIA  
SECRETARY OF STATE

SOS



25756130002 UCC 1 FILING

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  
LAWRENCE WALDO FRIESEN and any other derivatives thereof

OR 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
SUITE 407, 35-2855 PEMBINA HWY WINNIPEG MB R3T 2H5 CANADA

1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION PERSON 1f. JURISDICTION OF ORGANIZATION MANITOBA 1g. ORGANIZATIONAL ID #, if any 49-06-018458  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. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any  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

OR 3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX  
friesen Lawrence Waldo of

3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
General Delivery, Main P.O. Winnipeg Manitoba Canada

4. This FINANCING STATEMENT covers the following collateral:

This is Actual and Constructive NOTICE that all of DEBTOR's interest now held or hereafter acquired is hereby accepted as collateral for securing contractual obligation in favor of the Secured Party as detailed in a true, correct, complete, Notarized Security Agreement in the possession of the Secured Party. FORM SA-LWF018458CC NOTICE: In accordance with various USC Sections Re: Property-This is the filing of the DEBTOR into the Commercial Registry as a transmitting utility and the following property is hereby registered in the same as Public NOTICE of a commercial transaction: Certificate of Birth #49-06-018458, Employer Identification Number [REDACTED], UCC Contract Trust Account Number (pending). All property is Accepted for Value and is Exempt from Levy. Adjustment of this filing is from Public Policy HJR-192 (June 5, 1933), Public Law 73-10, UCC 10-104, and UCC 9-702. All proceeds, products, accounts, fixtures and the orders therefrom are released to the DEBTOR.

5. ALTERNATIVE DESIGNATION (if applicable):  LESSEE/LESSOR  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 05238 (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional) All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA

Secured Party Signature: Lawrence Waldo of Friesen

# UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY 05238

## 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME LAWRENCE WALDO FRIESEN and any other derivatives thereof			
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS: The Secured Party, a living soul, hereby secures the rights, interest and Title in Birth Certificate Number 49-06-018458 as received by the DEPARTMENT OF HEALTH AND SOCIAL SERVICES, PROVINCE OF MANITOBA, CANADA, and the Pledge represented by same included but not limited to, the res, pignus, hypotheca, hereditaments, the energy and all products derived therefrom, but not limited to the all capitalized names LAWRENCE WALDO FRIESEN, LAWRENCE W FRIESEN, and any other derivatives thereof, and all contracts and signatures predicated on the "STRAWMAN" described as the DEBTOR.

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## 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. SEE INSTRUCTIONS	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					
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

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:

See FORM SA-LWF018458CC

Exhibit A

16. Additional collateral description:

\*\*\*\*\*NOTICE is given\*\*\*\*\*

See FORM

SA-LWF018458CC

Affidavit

JURAT

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

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

# Affidavit

California state Republic )

) ss:

# 120749

Placer county )

25756130002

I, *Lawrence Waldo of friesen*, a living breathing man with sentient moral existence, declare by this Affidavit and signed in My own handwriting, that the following facts are true, correct and complete to the best of My knowledge and belief. This is my witword.

That on July 14th, 2010 **Security Agreement SA-LWF018458CC** was entered into by LAWRENCE WALDO FRIESEN, DEBTOR and *Lawrence Waldo of friesen*, Secured Party.

If any man or woman desiring to rebut, refute, point for point, the Security Agreement, answer so in the same manner, with a Notarized Affidavit using your Christian or family name for signature and mail to the below named Notary, address provided, within three (3) days upon receipt or Default will be obtained by virtue of the act of accession.

*Lawrence Waldo of friesen*

*Lawrence Waldo of friesen*

## Witness

On the 14<sup>th</sup> day of July 2010 A.D., *Lawrence Waldo of friesen*, a living breathing man who appeared with two witnesses, identified him and attested to the truth of this Affidavit with their signature. Witness Signatures on the back.

## NOTARY

PAM K MUSTAIN, NOTARY

PO BOX 336

LA GRANGE, CA 95329

*On this 14th day of July, 2010 A.D., I do hereby witnesseth the  
signing of this document.*

*Key Lovell Jund*

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*Secured Party Signature on file 00-606726*

*Pamela Kay Mustard*

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*Secured Party Signature on file 05-7033613836*

25756130002

# Jurat

State of California

County of Placer

Subscribed and sworn to (or affirmed) before me on this 14<sup>th</sup> day of JULY 2010

By LAWRENCE WALDO FRIESEN

(Name of document Signer)

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Notary Seal

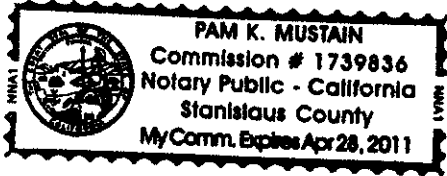
Notary Signature Pam K. Mustain

Pam K. Mustain, Notary Public

In and for the State of California

County of Stanislaus

My commission expires on April 28, 2011



## OPTIONAL INFORMATION

### DESCRIPTION OF THE ATTACHED DOCUMENT

Security Agreement

(Title or description of attached document)

SA # LWFO18458CC

(Title or description of attached document continued)

Number of Pages 14 Document date July 14<sup>th</sup>, 2010

DEBTOR: LAWRENCE WALDO FRIESEN

(Additional information)

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