



MAY 01 2015 09:21 P 4

Fee amount: 11.00 FB: 69-27556 COMP: CC

Received – DIANE L. BATTIATO Register of Deeds, Douglas County, NE 05/01/2015 09:21:18.00



TITLE:

UCC FINANCING STATEMENT

DATED:

APRIL 24, 2015

GRANTOR:

MIAMI STREET HOSPITALITY, LLC

ADDRESS:

6007 NORMAN RD

LINCOLN, NE 68512

GRANTEE:

GREAT WESTERN BANK

ADDRESS:

1235 N STREET

LINCOLN, NE 68508

LEGAL DESCRIPTION:

SEE ATTACHED EXHIBIT "A"

REFERENCE BOOK/PAGE:BOOK N/A PAGE N/A

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional) Imelda Corpuz 402-473-6171				
B. E-MAIL CONTACT AT FILER (optional)				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
Great Western Bank Attn: Business Banking 1235 N Street	 · _			
Lincoln NE 68508	1			
	THE ABOVE SPA	CE IS FO	R FILING OFFICE USE	ONLY
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of item 1 blank, check here and provide)	name; do not omit, modify, or abbreviate any part of the Individual Debtor information in item 10 of the Fi			
1a. ORGANIZATION'S NAME MIAMI STREET HOSPITALITY, LLC				
OR 16. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 6007 NORMAN RD	CITY LINCOLN	STATE NE	POSTAL CODE 68512	COUNTRY
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 2a. ORGANIZATION'S NAME	the Individual Debtor information in item 10 of the Fi	nancing St	atement Addendum (Form U	CC1Ad)
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL 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'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY'S NAME (or NAME of ASSIGNEE OF ASSIGNOR SECURED PARTY'S NAME (or NAME of ASSIGNEE OF ASSIGNOR SECURED PARTY'S NAME (or NAME OF ASSIGNEE OF ASSIGNOR SECURED PARTY'S NAME (OR NAME OF ASSIGNEE OF ASSIGNOR SECURED PARTY'S NAME (OR NAME OF ASSIGNOR	IDED DARTY). Preside selvere Convert Date and	- (2 2)		
3a. ORGANIZATION'S NAME				
Great Western Bank OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
S. HOVIDOALO CONTRA I	THOU ENGOVIE WILL	7.001110	TO LET WILL (O)	
3c. MAILING ADDRESS 1235 N Street	CITY Lincoln	STATE NE	POSTAL CODE 68508	COUNTRY
4. COLLATERAL: This financing statement covers the following collateral: All buildings, improvements, equipment, fixtures, timb condemnation proceeds, insurance proceeds, rents, proto, affixed upon, or installed in the real estate described	ofits, income and royalties, and all			s related
5. Check only if applicable and check only one box: Collateral is held in a Trust 6a. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction		heck <u>only</u> i	red by a Decedent's Persona f applicable and check <u>only</u> c ural Lien Non-UCC	ne bóx;
	Consignee/Consignor Seller/Buyer	**************		see/Licensor
8. OPTIONAL FILER REFERENCE DATA:				

UCC FINANCING STATEMENT ADDENDUM

17. MISCELLANEOUS:

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 T 9a. ORGANIZATION'S NAME MIAMI STREET HOSPITALITY, 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 (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 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 ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME 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) 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral 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: (if Debtor does not have a record interest): SEE ATTACHED LEGAL DESCRIPTION

LEGAL DESCRIPTION

THE LAND REFERRED TO IS SITUATED IN THE STATE OF NEBRASKA, COUNTY OF DOUGLAS AND IS DESCRIBED AS FOLLOWS:

ALL OF THAT CERTAIN LOT, PIECE OR PARCEL OF LAND, WITH THE BUILDINGS AND IMPROVEMENTS THEREON, SITUATED, LYING AND BEING IN DOUGLAS COUNTY, NEBRASKA AND BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

LOT 3, NORTH PARK 2ND ADDITION REPLAT 5, AN ADDITION TO THE CITY OF OMAHA, IN DOUGLAS COUNTY, NEBRASKA; TOGETHER WITH PERMANENT INGRESS AND EGRESS EASEMENTS FILED APRIL 29, 1999 IN BOOK 1291 AT PAGE 229; AND A 50' WIDE INGRESS AND EGRESS EASEMENT OVER THE SOUTHERLY PORTION OF LOT 2, AS SHOWN ON THE PLAT FILED IN BOOK 2072 AT PAGE 115 IN DOUGLAS COUNTY, NEBRASKA, AS MORE COMMONLY KNOWN AS 11818 MIAMI STREET, OMAHA, NEBRASKA.