669791 FIXTURE FILING
BOOK 769 PAGE 0295
RECORDED 05/20/2010 AT 02:50 PM

The second of the second	EDA S. T	HOMPSON, SHERIDAN COUNTY	CLERK
UCC FINANCING STATEMENT			
FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
A. NAME & PHONE OF CONTACT AT FILER (optional)	1		
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
First Federal Savings Bank			
P.O. Box 6007			•
Sheridan, WY 82801	1 1		
	i I		
	1		
		/E SPACE IS FOR FILING OFFICE USE	ONLY
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only png debtor name	(1a or 1b) - do not abbreviate or co	mbine names	
1a. ORGANIZATION'S NAME			
OR AIB, LLC	FIRST NAME	MIDDLE NAME	SUFFIX
16. INDIVIDUAL S CAST NAME	FIRST NAME	MIDDEE NAME	SOFFIX
1c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
	Sheridan		Prince (1) Control (1) (1) (1) (1)
2014 Demple St 1d. TAX ID #: SSN OR EIN ADD'L INFO RE 18. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	AL 82801 1g. ORGANIZATIONAL ID #, if a	USA
ORGANIZATION Limited Liability	Wyoming		NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only or		phreviate or combine names	(A) NONE
2a. ORGANIZATION'S NAME			
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
			l .
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if a	eny
DEBTOR	1 1,		□ NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR	S/P) - insert only one secured party name (3	8a or 3b)	
3a. ORGANIZATION'S NAME			
OR First Federal Savings Bank			
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS	CITY		
	10000 NO 100	STATE POSTAL CODE	COUNTRY
46 West Brundage	Sheridan	WY 82801	USA
4. This FINANCING STATEMENT covers the following colleteral: FIXTURES:	All goods now or in the futu	are affixed or attached to real	estate.
1			
	i i		
	1		
	j		
5. ALTERNATIVE DESIGNATION (if applicable): LESSEE/LESSOR CON	SIGNEE/CONSIGNOR D BAILEE/BAILOF	SELLER/BUYER AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the R ESTATE RECORDS. Attach Addendum	EAL 7. Check to REQUEST SEARCH RE		Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA	100000000000000000000000000000000000000	Cabusana Cara pantota Ca	. Debitor 2
	: 1		

CC FINANCING STATEMENT ADDEN	IDUM				
AME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCI	NG STATEMENT				
AIB, LLC					Area .
95. INDIVIDUAL'S LAST NAME FIRST NAME	N	NIDDLE NAME, SUFFIX	v 18		
MISCELLANEOUS:		<u> </u>			
			ļ		
			THE ABOVE SPACE	IS FOR FILING OFFICE	USE ONLY
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME -	insert only <u>one</u> nam	ne (11a or 11b) - d	not abbreviate or combin	e names	
R 11b. INDIVIDUAL'S LAST NAME	Trinet	NAME	MIDDLE	NATE -	SUFFIX
	rinsi	IVAIVE			
c. MAILING ADDRESS	CITY	Ţ~~~~	STATE	POSTAL CODE	COUNTRY
d. TAX ID #: SSN OR EIN ADD'L INFO RE 11e. TYPE OF ORGA ORGANIZATION DEBTOR	ANIZATION 11f. J	URISDICTION OF ORG	ANIZATION 11g. OF	GANIZATIONAL ID #, if an	NONE
ADDITIONAL SECURED PARTY'S gr ASS	IGNOR S/P'S N	AME - insert only o	ne name (12a or 12b)		
	·		1		Tauero.
12b. INDIVIDUAL'S LAST NAME	FIRST	NAME	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
. This FINANCING STATEMENT covers timber to be cut or	as-extracted 16.	Additional collateral des	cription:	· <u> </u>	
collateral, or is filed as a X fixture filing. Description of real estate:					
he goods are or are to become fixtures on: LO					
tir i and attentitional do dite and a					
		1			
THE ACRT SUBDIVISION TO THE CITY O HERIDAN, SHERIDAN COUNTY, WYOM					
HERIDAN, SHERIDAN COUNTY, WYOM	ING				
HERIDAN, SHERIDAN COUNTY, WYOM	ING				
HERIDAN, SHERIDAN COUNTY, WYOM i. Name and address of a RECORD OWNER of above-described rea	ING				
HERIDAN, SHERIDAN COUNTY, WYOM Name and address of a RECORD OWNER of above-described rea	ING	tor is a Trust or	e and check <u>only</u> one box. Trustee acting with respect to	property held in trust or	Docedent's Estate
HERIDAN, SHERIDAN COUNTY, WYOM i. Name and address of a RECORD OWNER of above-described rea	ING	tor is a Trust or Check only if applicab	Trustee acting with respect to le and check only one box.	property held in trust or	Docedent's Estate
HERIDAN, SHERIDAN COUNTY, WYOM 5. Name and address of a RECORD OWNER of above-described rea	ING	tor is a Trust or Check only if applicab	Trustee acting with respect to le and check only one box.	 	Decedent's Estate