



TID:
 16-06-328-018
 16-06-328-025
 16-06-328-030
 01459-25459

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 Gary W. Ott
 Recorder, Salt Lake County, UT
 STEWART TITLE INS AGCY OF UT
 BY: eCASH, DEPUTY - EF 3 P.

UCC FINANCING STATEMENT
 FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

**UNIVERSITY FIRST FEDERAL CREDIT UNION
 MEMBER BUSINESS LENDING
 490 EAST 500 SOUTH SUITE 200
 SALT LAKE CITY, UT 84111**

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 1D of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME OASIS GAMES LLC				
OR	1b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
1c. MAILING ADDRESS 255 EAST 400 SOUTH		CITY SALT LAKE CITY	STATE UT	POSTAL CODE 84111
			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 1D 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 UNIVERSITY FIRST FEDERAL CREDIT UNION				
OR	3b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3c. MAILING ADDRESS P.O. BOX 58025		CITY SALT LAKE CITY	STATE UT	POSTAL CODE 84158
			COUNTRY USA	

4. COLLATERAL: This financing statement covers the following collateral:
ALL INVENTORY, ACCOUNTS RECEIVABLE AND RESTAURANT EQUIPMENT; 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.

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): Lessor/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:

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 OASIS GAMES 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)

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 (if Debtor does not have a record interest):
OASIS GAMES LLC
255 EAST 400 SOUTH
SALT LAKE CITY, UT 84111

16. Description of real estate:
EXHIBIT "A".

17. MISCELLANEOUS:

EXHIBIT "A" LEGAL DESCRIPTION

File No.: 01459-25459

The land referred to herein is situated in the County of Salt Lake, State of Utah, and is described as follows:

PARCEL 1: (16-06-328-018)

Commencing at the Southwest Corner of Lot 1, Block 54, Plat "A", Salt Lake City Survey and running thence East 82.5; thence North 10 rods; thence West 82.5 feet; thence South 10 rods to the place of beginning.

PARCEL 2: (16-06-328-025)

Commencing 10 rods North of the Southeast Corner of Lot 1, Block 54, Plat "A", Salt Lake City Survey, and running thence West 5 rods; thence South 40 feet; thence East 5 rods; thence North 40 feet; to the place of beginning.

PARCEL 3: (16-06-328-030)

Commencing at the Southeast corner of Lot 2, Block 54, Plat "A", Salt Lake City Survey, thence along the South line of said Lot 2 South $89^{\circ}58'16''$ West 10.17 feet, to the approximate point of an interior wall with the adjoining building to the West, thence North $00^{\circ}24'14''$ West 165.08 feet along said interior wall and beyond to the North property line of a parcel recorded as Entry No. 11169435 in Book 9919 Pages 2493-2497 on April 20, 2011, thence North $89^{\circ}58'16''$ East 11.33 feet to the East line of aforesaid Lot 2, Block 54, thence along aforesaid Lot 2 Block 54 South 165.08 feet to the point of beginning.

Tax ID Number: 16-06-328-018, 16-06-328-025, and 16-06-328-030