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NAME & PHONE OF CONTACT AT FILER [optional]			/	
Diligenz, Inc. 1-800-858-5294		Ent 230521	Bk 967 Pg 10	
. SEND ACKNOWLEDGMENT TO: (Name and Address)		Date 3-Jul-2006 1	1:22PM Fee \$12.00	
20460254	¬	LuAnn Adams - Fil		
Prepared by:		Box Elder Co., U		
Frepared by.		For DILIGENZ		
Diligenz, Inc.		03-128-	0065	
6500 Harbour Heights Pkwy, Suite 400	į.			
Mukilteo, WA 98275	<u>.</u>			
Filed In: U	tah Box Elder			
		SPACE IS FOR FILING OFFICE USE ONLY		
DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name Tra. ORGANIZATION'S NAME	e (1a or 1b) - do not abbreviate or combine names			
D & D Business Investments, LLC				
R 1b. INDIVIDUAL'S LAST NAME	IFIRST NAME	MIDDLE NAME	Isuffix	
			331117	
: MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY	
390 South Main	Brigham City	UT 84302	USA	
I. TAX ID #: SSN OR EIN ADD'L INFO RE 18. TYPE OF ORGANIZATIO		1g. ORGANIZATIONAL ID #, if any		
ORGANIZATION LLC	; UT	6215748-0160	NONE	
DEDICK	1 - '			
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only	one debtor name (2a or 2b) - do not abbreviate or con	mbine names		
BESTOR	one debtor name (2a or 2b) - do not abbreviate or con	mbine names		
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only 2a. ORGANIZATION'S NAME			To the state of th	
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only 2a. ORGANIZATION'S NAME	one debtor name (2a or 2b) - do not abbreviate or con	mbine names MIDDLE NAME	SUFFIX	
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only 28. ORGANIZATION'S NAME R 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAME			SUFFIX	
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAME c. MAILING ADDRESS	FIRST NAME	MIDDLE NAME STATE POSTAL CODE	COUNTRY	
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAME 3. MAILING ADDRESS 4. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION CORGANIZATION CORGANI	FIRST NAME	MIDDLE NAME	COUNTRY	
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ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAME 3. MAILING ADDRESS 3. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION DEBTOR 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNATION S) NAME Big O Tires, Inc.	FIRST NAME CITY N 2f. JURISDICTION OF ORGANIZATION SNOR S/P) - insert only one secured party name (3a o	MIDDLE NAME STATE POSTAL CODE 2g. ORGANIZATIONAL ID #, if s	any NONE	

5. ALTERNATIVE DESIGNATION [if applica	ble]: LESSEE/LESSOR	CONSIGNEE/CO	NSIGNOR BAI	LEE/BAILOR SE	ELLER/BUYER A	G. LIEN NO	ON-UCC FILING
5. X This FINANCING STATEMENT is to b ESTATE RECORDS. Attach Adder	filed [for record] (or recorded dum	d) in the REAL 7.0	Check to REQUEST S ADDITIONAL FEET	SEARCH REPORT(S) o		ebtors Debtor	r 1 Debtor 2
3. OPTIONAL FILER REFERENCE DATA					,		
44107 Brigham City, UT						2	20460254

Legal Description for Brigham City, UT (390 S Main):

Beginning at the Southeast corner of Lot 1, Block 55, Plat B, Brigham City Survey, running thence West 122.10 feet, thence North 88 feet, thence West 90 feet, thence North 5 feet, thence East 43 feet, thence North 39 feet, thence East 169.10 feet, thence South 132 feet to the point of beginning.