



UCC FINANCING STATEMENT

State Form 50181 (5-01)

Approved by State Board of Accounts, 2001

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2005 000632

2005 JUL 14 11:09:58

FOLLOW INSTRUCTIONS (FRONT AND BACK) CAREFULLY.

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

A. NAME AND PHONE OF CONTACT AT FILER (optional) Glenn R. Patterson 219-769-3561 x117
B. SEND ACKNOWLEDGMENT TO: (Name and Address) Glenn R. Patterson, Esq. Lucas, Holcomb & Medrea, LLP Easton Court 300 East 90th Drive Merrillville, IN 46410

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Colfax Street, LLC						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 14820 Iowa Street		CITY Crown Point		STATE IN	POSTAL CODE 46307	COUNTRY USA
	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor (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
	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> 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 Jason Corp.						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 14820 Iowa Street		CITY Crown Point		STATE IN	POSTAL CODE 46307	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

All Debtor's assets now or at any time located on or used in connection with the real estate commonly known as 301 North Colfax Street, Griffith, Indiana

5. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> LESSEE / LESSOR <input type="checkbox"/> CONSIGNEE / CONSIGNOR <input type="checkbox"/> BAILEE / BAILOR <input type="checkbox"/> SELLER / BUYER <input type="checkbox"/> AG. LIEN <input type="checkbox"/> NON-UCC FILING	
6. <input type="checkbox"/> This FINANCIAL STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional) <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA	

FILING OFFICE COPY - INDIANA UCC FINANCING STATEMENT

7.00
PK # 97461