2023-517513 06/07/2023 12:11 PM TOTAL FEES: 25.00 BY: JAS PG #: 7 RECORDED AS PRESENTED STATE OF INDIANA LAKE COUNTY FILED FOR RECORD GINA PIMENTEL RECORDER



FOLLOW INSTRUCTIONS.

| A NAME & PHONE OF CONTACT AT FILER (optional)   |  |              |                                   |                    |
|---|--|--------------|-----------------------------------|--------------------|
| MICHELE R. MESSINA P.C. & 631-676-3880  B. E-MAIL CONTACT AT FILER (optional)   |  |              |                                   |                    |
|   |  |              |                                   |                    |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address)   |  |              |                                   |                    |
| Loan Funder, LLC Series 53913   | 71   |              |                                   |                    |
| 645 Madison Ave, 19th FL  | '1   |              |                                   |                    |
| New York, NY 10022  |  |              |                                   |                    |
|   | - I  |              |                                   |                    |
| L O   | THE ABOVE SPA  | CE IS FO     | R FILING OFFICE USE               | ONLY.              |
| 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (Use exact, full  | name; do not omit, modity, or abbreviate any part o  | f the Deblo  | r's name.); if any part of the Is | ndividual Debtor's |
|   | he Individual Debtor information in Item 10 of the F   | handing St   | atement Addendum (Form UC         | CC1Ad).            |
| 1a. ORGANIZATION'S NAME   |  |              |                                   |                    |
| OR 1b. INDIVIDUAL'S SURNAME   | FIRST PERSONAL NAME  | ADDITIO      | MAL NAME(S)/INITIAL(S)            | SUFFIX             |
| Peters  | Jamie  |              |                                   |                    |
| 1c. MAILING ADDRESS   | City   | STATE        | POSTAL CODE                       | COUNTRY            |
| 312 West 2nd Street 1200  | Casper   | WY           | 82601                             | USA                |
| <ol> <li>DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (Use exect, full) name will not fit in line 2b, leave all of item 2 blank, check here.</li> </ol> | name; do not conti, modify, or abbreviate any part o<br>he individual Debtor Information in Item 10 of the F   |              |                                   |                    |
| 28. ORGANIZATION'S NAME   | THE RECEIVED CONTRACT OF THE PERSON OF THE P | nanung or    | atometic youthfulfill (Politi OC  |                    |
| 1   |  |              |                                   |                    |
| OK 2b. INDIVIDUAL'S SURNAME   | FIRST PERSONAL NAME  | ADDITIO      | NAL NAME(S)/INITIAL(S)            | SUFFIX             |
| Peters  | Jasmine  |              |                                   | Ī                  |
| 2c. MAILING ADDRESS<br>312 West 2nd Street 1200   | CONTRACTOR   | STATE        | POSTAL CODE                       | COUNTRY            |
|   | Casper   |              | 82601                             | USA                |
| <ol> <li>SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURING ORGANIZATIONS NAME)</li> </ol>  | RED PARTY): Provide only one Secured Party name  | ne (3a or 3b | 1                                 |                    |
| Loan Funder, LLC Series 53913   | '/) <sub>X</sub>   |              |                                   |                    |
| OR 3b. INDIVIDUAL'S SURNAME   | FIRST PERSONAL NAME  | ADDITIO      | NAL MAME(S)/INITIAL(S)            | SUFFIX             |
|   | 5  |              |                                   |                    |
| 30, MAILING ADDRESS<br>645 Madison Ave. 19th FL   | NEW YORK   | STATE        | POSTAL CODE<br>10022              | USA                |
|   |  |              |                                   | USA                |
| 4. COLLATERAL: This financing statement covers the following collateral:  |  | $\sim$       |                                   |                    |
| SEE EXHIBIT "A" "B" "C" AND SCHEDULE A ATTACHE  | D HERETO   | 4            | )                                 |                    |
|   |  |              | /                                 |                    |
|   |  |              | 0/_                               |                    |
|   |  |              | 0/0/0/                            |                    |
|   |  |              |                                   |                    |
|   |  |              |                                   |                    |

| 5. Check goly if applicable and check goly one box: Collateral is held in a Trust (see UCC1Ad, item 17 and instructions) | being administered by a Decedent's Personal Representative |
|--|--|
| Ga. Check only if applicable and check only one box:   | 6b. Check only if applicable and check only one box        |
| Public-Finance Transaction Manufactured-Home Transaction A Debter is a Transmitting Utility                              | Agricultural Lien Non-UCC Filing                           |
| 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buy                                 | or Ballee/Ballor Licensee/Licensor                         |
| 8. OPTIONAL FILER REFERENCE DATA:  |  |

### UCC FINANCING STATEMENT ADDENDUM

Part of State Form 50181 (R3 / 9-19)

| <b>8</b> . [ | LLOW INSTRUCTIONS.  IAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Stateme   | nt; if line 15 was left blank   | 1   |                   |                            |                 |
|--------------|--|---|---|-------------------|----------------------------|-----------------|
| 1            | ecause Individual Debtor name did not fit, check here.   |   |   |                   |                            |                 |
|              | Se. ORGANIZATION'S NAME  |   | ]   |                   |                            |                 |
| שר           |  |   |   |                   |                            |                 |
| **           | 96. INDIVIDUAL'S SURNAME Peters  |   | ]   |                   |                            |                 |
|              | FIRST PERSONAL NAME  Jamie   |   |   |                   |                            |                 |
|              | ADDITIONAL NAME(S)(INITIAL(S)  | SUFFIX  | THE ABOVE S                                   | SPACE             | IS FOR FILING OFFICE       | USE ONLY.       |
|              | DEBTOR'S NAME: Provide (10a er 10b) only one additional Debtor nam do not omit, modify, or abbreviate any part of the Debtor's name.) and enter t  | e or Debtor name that did not fit<br>he malling address in line 10c.                | in line 1b or 2b of the Fir                   | nancing S         | italement (Form UCC1) (Use | exact, full nar |
|              | 10s. ORGANIZATION'S NAME   |   |   |                   | -                          |                 |
| ıR           | 106. INDIVIDUAL'S SURNAME Peters   |   |   |                   |                            |                 |
|              | INDIVIDUAL'S FIRST PERSONAL NAME  Jassmine   |   |   |                   |                            |                 |
|              | INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S)  | )/  |   |                   |                            | SUFFIX          |
| Dc.          | MAILING ADDRESS  | CITY  |   | STATE             | POSTAL CODE                | COUNTRY         |
|              | 11a. ORGANIZATION'S MAME   | SNOR SECURED PARTY  | /'S NAME: Provide or                          | nly <u>one</u> na | ume (11a or 11b).          |                 |
| R            | 11b. INDIVIDUAL'S SURNAME  | FIRST PERSONAL NAME   | <b>'</b> A                                    | ADDITIO           | NAL NAME(S)/INITIAL(S)     | SUFFIX          |
| 10.          | MAILING ADDRESS  | CITY  | 171   | STATE             | POSTAL CODE                | COUNTRY         |
| 2. /         | ADDITIONAL SPACE FOR ITEM 4 (Collatoral):  |   |   |                   |                            |                 |
|              |  |   |   |                   |                            |                 |
|              |  |   | 16  | 0                 |                            |                 |
|              |  |   |   | 20                |                            |                 |
|              |  |   |   | -C                | D <sub>r</sub>             |                 |
| 3.           | This FIMANCING STATEMENT is to be filled (for record) (or recorded) in the REAL ESTATE RECORDS (of applicable)   |   | EMENT:  |                   |                            | Schus Miss      |
| 5. 1         | This FINANCING STATCMENT is to be filed (for record) (or recorded) in rEAL ESTATE RECORDS (if applicable).  The Access of a RECORD OWNER of real stake described in litera 10 below of an arrow before). | the 14. This FINANCING STATION of source timber to be 16. Description of real estat | EMENT:  |                   | 102                        | fixture Ming    |
| 5. 1         | REAL ESTATE RECORDS (#applicable).  Iame and address of a RECORD OWNER of real estate described in item 16   | covers timber to be 16. Description of real estal  100% interest in                 | EMENT:  cut covers as-ex  e:  JP Enterprise H | xtracted o        | ioliateral                 |                 |
| 5. 1         | REAL ESTATE RECORDS (#applicable).  Iame and address of a RECORD OWNER of real estate described in item 16   | covers timber to be 16. Description of real estal  100% interest in                 | EMENT:<br>cut covers as-e:<br>le:             | xtracted o        | ioliateral                 |                 |
| 5. 1         | REAL ESTATE RECORDS (#applicable).  Iame and address of a RECORD OWNER of real estate described in item 16   | covers timber to be 16. Description of real estal  100% interest in                 | EMENT:  cut covers as-ex  e:  JP Enterprise H | xtracted o        | ioliateral                 |                 |
| 3.  <br>5. t | REAL ESTATE RECORDS (#applicable).  Iame and address of a RECORD OWNER of real estate described in item 16   | covers timber to be 16. Description of real estal  100% interest in                 | EMENT:  cut covers as-ex  e:  JP Enterprise H | xtracted o        | ioliateral                 |                 |

### UCC FINANCING STATEMENT ADDITIONAL PARTY Part of State Form 50181 (R3 / 9-19)

FOLLOW INSTRUCTIONS. 18. NAME OF FIRST DEBTOR: Same as line 1a or 15 on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here. 188. ORGANIZATION'S NAME OR 18b. INDIVIDUAL'S SURNAME FIRST PERSONAL N ADDITIONAL NAME(S)/INITIAL(S) SHEEK THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY. 19. ADDITIONAL DEBTOR'S NAME. Provide only one Debtor name (19a or 19b) (Use exect, full name; do not omit, modify, or abbroriate any part of the Debtor's name.) 19a, ORGANIZATION'S NAME 19b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(SWINITIAL(S) FIRST PERSONAL NAME CHECK 19c, MAILING ADDRESS STATE POSTAL CODE COUNTRY 20. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (20a or 20b) (Use exect, full name; do not omit, modify, or abbreviate any part of the Debtor's name.) 20s. ORGANIZATION'S NAME OR 20b, INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SVINITIAL(S) SUFFIX 20c. MAILING ADDRESS STATE POSTAL CODE COUNTRY 21. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21s or 21b) (Use exact, full name; do not omit, modify, or abbroviate any part of the Debtor's name.) 21a ORGANIZATION'S NAME 21b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 21c. MAILING ADDRESS STATE POSTAL CODE ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (22s or 22b), 228. ORGANIZATION'S NAME OR 226, INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADD TIONAL NAME(SVINITIALIS) SUFFIX 22¢, MAILING ADDRESS CITY STATE TPOSTAL CODE COLINTRY ASSIGNOR SECURED PARTY'S NAME: Provide only one name (23s or 23b). 23. ADDITIONAL SECURED PARTY'S NAME OF 23a, ORGANIZATION'S NAME 23b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SHEERY 23c. MAILING ADDRESS TPOSTAL CODE COUNTRY 24. MISCELLANEOUS:

#### EXHIBIT "A"

#### DESCRIPTION OF PLEDGED

### COLLATERAL

- a. All Ownership Interests that the Debtor has in J Millhouse Co., A Wyoming Limited Liability Company Authorized to do business in Indiana, having an office for the transaction of business at 312 West 2nd Street 1200, Casper, WY, 82601 ("Borrower") now or hereafter acquired, and all certificates of ownership or other indicia of ownership representing any Ownership Interests, shares or otherwise referred to together with all rights to the proceeds thereof as the "Units";
- All dividends and other distributions received by Pledgor from the Borrower ("Pledgor" means Jamie Peters and Jasuine Peters and includes all co-signers, guarantors of the Note related Loan Documents; and
- c. All "Proceeds" and Assets evened by Borrower as such term is defined in the Uniform Commercial Code as the same may from time-to-time be in effect in the Commonwealth of New York (the "Code").

#### EXHIBIT "B"

### LEASES & RENTS

All of Debtor's interest in any and all leases or leases, or subsequent leases, with amendments, if any, and all month-to-month tenancies with respect to portions or all of the real property located at 712 NORTH

JACKSON STREET, CROWN POINT, IN 46307 (the "Premises")(and more particularly described in Schedule "A" amexed hereto) and any modifications, supplements, extensions and renewals thereof and any guarantees of the lessee's obligations thereunder, and all rents, income, and profits arising from the leases and extensions and renewals thereof, if any, and together with all rents, income, and profits due or to become due from the Premises and any part thereofy which are now in existence or which may be created in the future during the term of this Assignment, whether or not recorded, together with and including, the Debtor's entire interest in any lease, tenancy, retail, or occupancy agreement now existing or which may be made hereafter affecting the Premises.

TOGETHER WITH all the right, power, and authority of the Debtor to alter, modify, or change or to terminate the term thereof or accept a surrender thereof or to cancel the same or to waive or release the lessee from the performance or observance by the lessee of any obligation or condition thereof or to accept rents or any other payments thereunder.

#### EXHIBIT "C"

#### CONTRACTS, PLANS, PERMITS, & APPROVALS

Debtor's interest in all agreements, contracts and contract rights between Debtor and any and all contractors, subcontractors and/or material suppliers, and all plans, permits, licenses and approvals in connection with the construction, renovation, development and improvement of the real property located at 712 NORTH JACKSON STREET, CROWN POINT, IN 46307 described in Schedule "A" attached hereto and made a part hereof, and any improvements thereon (the "Premises") and which agreements, contracts, contract rights, plans, permits, licenses and approvals are now in existence or which may be created, amended, supplemented or otherwise modified in the future, whether or not recorded, (and together with any other documents executed in connection therewith, including waivers and consents related theretto), including but not limited to the following:

- All agreements with respect to architectural and engineering services for the improvements to the Premises.
- 2. All bonds securing payment and performance of Assignor's improvements to the Premises.
- All of Assignor's contracts, now existing or hereafter entered into, for the furnishing of supplies, materials, labors, or services (including professional services) for the construction of the improvements to the Premises.
- All Permits, licenses, and other certificates, now held or hereafter acquired by Assignor, relating to the construction and operation of the improvements to the Premises; and
- All plans and specifications (including site plans) relating to the construction and operating of the improvements to the Premises.

TOGETHER WITH all the right, power and authority of Debtor to alter, modify or change, or terminate any terms thereof or to release any party thereto from the obligation or condition thereof.

#### SCHEDULE A PROPERTY DESCRIPTION

Property address is commonly known as: 712 NORTH JACKSON STREET, CROWN POINT, IN 46307

The Land is described as follows:

Lots M and 18 in Block 3 in Rolling View Addition to Crown Point, as per plat therof, recorded in Plat Book 1, page 2, in the Office of the Recorder of Lake County, Indiana. Commonly known as 712 North Jackson Street, Crown Point, IN 46307

