



SPENCER J. COX
Governor

DEIDRE M. HENDERSON
Lieutenant Governor

UTAH DEPARTMENT OF COMMERCE

Division of Corporations and Commercial Code

MARGARET W. BUSSE
Executive Director

G. SCOTT WHITTAKER
Division Director

June 02, 2026

Justin Watson
9837 Peach Street
Wetumpka, AL 36092 - USA

UCC-11 Information Request

Your Request for Information has been processed by the Utah Division of Corporations and Commercial Code matching filing(s) in the Division's computerized database with the following search parameter(s) and the "Exact" filter:

Search Number : 2606021254566-1

Debtor Name: LEGALLY MINE, LLC

Debtor Type: Organization

Date Range: All Available Filings

Search Response: All (Lapsed and Unlapsed)

Copies: Unlapsed Only

City:

The Utah Division of Corporations and Commercial Code hereby certifies that the attached information is filed and of Record in the Offices of the Division as of 05/31/2026 at 18:00 MST.

Sincerely,
FILING OFFICER



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Liens Filing Search Report

The Utah Division of Corporations and Commercial Code hereby certifies that the attached list is a true and exact list of all financing statements or CFS liens and related subsequent documentation for the debtor below as filed with the Division of Corporations and Commercial Code office, Uniform Commercial Code Division, as of the Through Date below.

Date Searched: 6/2/2026 1:09:42 PM **Search Criteria:**
Searched by: Justin Watson
Filing Chains: 13
Good Through Filing Date: 05/31/2026
Cities:
Date Range: All Available Filings
Include Filings Outside Range?: All Available Filings

June 02, 2026

Filing Status: ALL (Lapsed and Unlapsed)

Include Records: N/A

Organization Name: LEGALLY MINE, LLC

Filing Chain#: 1
Original File#: 200810703927-7

Lapse Date: 08/11/2025
Lien Type: UCC Lien

Filing #: 200810703927-7 **Filing Date:** 08/10/2020 **Filing Type:** Initial Financing Statement UCC-1 **Page Count:** 2

Debtors

Name	Type	Action Type	Address
LEGALLY MINE, LLC	Organization	N/A	1337 E 750 N OREM, UT 84097, USA

Secured Parties

Name	Type	Action Type	Address
JOHN MASEK	Individual	N/A	319 E. 2ND STREET CANBY, OR 97013, USA

Name	Type	Action Type	Address
DAVID ORTIZ	Individual	N/A	305 NE 16TH AVENUE BATTLE GROUND, WA 98604, USA

Collateral

- (a) 450,000 shares of common stock of Bam Franchising, Inc., an Oregon corporation ("Shares");
- (b) all proceeds of the Shares; and
- (c) LEGALLY MINE, LLC's books of account and records relating to the Shares, wherever located, whether presently owned or subsequently acquired.



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Filing Chain#: 2
Original File#: 210216749881-3

Lapse Date: 02/13/2026
Lien Type: UCC Lien

Filing #: 210216749881-3 **Filing Date:** 02/12/2021 **Filing Type:** Initial Financing Statement UCC-1 **Page Count:** 6

Debtors

Name	Type	Action Type	Address
DANIEL MCNEFF	Individual	N/A	1337 EAST 750 NORTH OREM, UT 84097, USA

Name	Type	Action Type	Address
LEGALLY MINE, LLC	Organization	N/A	1337 EAST 750 NORTH OREM, UT 84097, USA

Secured Parties

Name	Type	Action Type	Address
AMMON MCNEFF	Individual	N/A	659 NORTH 850 WEST PROVO, UT 84604, USA

Name	Type	Action Type	Address
MATTHEW MCNEFF	Individual	N/A	1074 WEST 400 SOUTH OREM, UT 84058, USA

Collateral

All right, title, interest, claims and demands of Debtor in and to the following property: 21% of the total membership interest in Legally Mine, LLC. All computers, emails, any passwords related to the Legally Mine, client information, office supplies, cash, accounts receivables, access to the building, machinery, phones, and furniture. The above assets are pledged security for the binding settlement agreement and promissory note valued at \$1,728,000 at execution.



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Filing Chain#: 3
Original File#: 2021789704-3

Lapse Date: 07/17/2026
Lien Type: UCC Lien

Filing #: 2021789704-3	Filing Date: 07/17/2021	Filing Type: Initial Financing Statement UCC-1	Page Count: 1
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Debtors

Name	Type	Action Type	Address
LEGALLY MINE, LLC	Organization	N/A	1337 EAST 250 NORTH PREM, UT 84097, USA

Secured Parties

Name	Type	Action Type	Address
SECURED LENDER SOLUTIONS	Organization	N/A	P.O. BOX 2576 SPRINGFIELD, IL 62708, USA

Collateral

All presently existing or hereafter arising, now owned or hereafter acquired assets of the debtor. THE SECURED PARTY NAMED IN THIS RECORD IS ACTING IN A REPRESENTATIVE CAPACITY FOR PURPOSES OF FORWARDING NOTICES and INQUIRIES REGARDING THIS RECORD. FOR MORE INFORMATION, PLEASE CONTACT THE SECURED PARTY AT THE ADDRESS LISTED ABOVE OR AT UCCSPREP@CSCINFO.COM.



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Filing Chain#: 4
Original File#: 210827800456-3

Lapse Date: 08/27/2026
Lien Type: UCC Lien

Filing #: 210827800456-3	Filing Date: 08/27/2021	Filing Type: Initial Financing Statement UCC-1	Page Count: 1
<u>Debtors</u>			
Name	Type	Action Type	Address
LEGALLY MINE LLC	Organization	N/A	1337 EAST 750 NORTH OREM, UT 84097, USA
Name	Type	Action Type	Address
DANIEL MCNEFF	Individual	N/A	14832 VINTAGE VIEW LANE DRAPER, UT 84020, USA
<u>Secured Parties</u>			
Name	Type	Action Type	Address
FAVO FUNDING LLC	Organization	N/A	1025 OLD COUNTRY ROAD, SUITE 311 WESTBURY, NY 11590, USA

Collateral

Legally Mine LLC has sold its future receivables of \$123,250 to Favo Funding LLC for \$85,000. Paying FAVO Funding back at a rate of \$880.36 for a period of 140 days.

This statement is pursuant to the terms of a PAYMENT RIGHTS PURCHASE AND SALE AGREEMENT dated 8/23/2021 between the Debtor and the Secured Party as executed.

Filing #: 230913990881-9	Filing Date: 09/13/2023	Filing Type: Termination UCC-3	Page Count: 1
Filing #: 230928994603-5	Filing Date: 09/28/2023	Filing Type: Termination UCC-3	Page Count: 1



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Filing Chain#: 5
Original File#: 210827800457-0

Lapse Date: 08/27/2026
Lien Type: UCC Lien

Filing #: 210827800457-0	Filing Date: 08/27/2021	Filing Type: Initial Financing Statement UCC-1	Page Count: 1
<u>Debtors</u>			
Name	Type	Action Type	Address
LEGALLY MINE LLC	Organization	N/A	1337 EAST 750 NORTH OREM, UT 84097, USA
Name	Type	Action Type	Address
DANIEL MCNEFF	Individual	N/A	14832 VINTAGE VIEW LANE DRAPER, UT 84020, USA
<u>Secured Parties</u>			
Name	Type	Action Type	Address
FAVO FUNDING LLC	Organization	N/A	1025 OLD COUNTRY ROAD, SUITE 311 WESTBURY, NY 11590, USA

Collateral

Legally Mine LLC has sold its future receivables of \$140,000 to Favo Funding LLC for \$100,000. Paying FAVO Funding LLC back at a rate of \$700.00 for a period of 200 days.

This statement is pursuant to the terms of a PAYMENT RIGHTS PURCHASE AND SALE AGREEMENT dated 07/20/2021 between the Debtor and the Secured Party as executed.



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Filing Chain#: 6
Original File#: 20241017894-5

Lapse Date: 01/17/2029
Lien Type: UCC Lien

Filing #: 20241017894-5	Filing Date: 01/17/2024	Filing Type: Initial Financing Statement UCC-1	Page Count: 1
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Debtors

Name	Type	Action Type	Address
LEGALLY MINE, LLC	Organization	N/A	1337 E 750 N OREM, UT 84097, USA

Secured Parties

Name	Type	Action Type	Address
C T CORPORATION SYSTEM, AS REPRESENTATIVE	Organization	N/A	330 N BRAND BLVD, SUITE 700, ATTN: SPRS GLENDALE, CA 91203, USA

Collateral

Secured Party has purchased certain "Future Receipts" from Debtor. "Future Receipts" means all payments made to Debtor by cash, check, ACH or other electronic transfer, credit card, debit card, bank card, charge card or other form of monetary payment in the ordinary course of Debtor's business. Notice: Pursuant to the agreement between Debtor and Secured Party, Debtor is prohibited from obtaining any financing that impairs the value of the Future Receipts or Secured Party's right to collect same. In the event that any entity is granted a security interest in Debtor's Future Receipts contrary to the above, the Secured Party asserts a claim to any proceeds thereof received by such entity. As per the FUTURE RECEIVABLES SALE AGREEMENT, the Secured Party has a security interest in all of Debtor's present and future accounts, chattel paper, deposit accounts, documents, personal property, assets and fixtures, general intangibles, instruments and inventory whenever located, equipment, and proceeds now or hereafter owned or acquired by Debtor.



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Filing Chain#: 7
Original File#: 20241048876-8

Lapse Date: 05/16/2029
Lien Type: UCC Lien

Filing #: 20241048876-8	Filing Date: 05/16/2024	Filing Type: Initial Financing Statement UCC-1	Page Count: 1
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Debtors

Name	Type	Action Type	Address
LEGALLY MINE LLC	Organization	N/A	1337 EAST 750 NORTH OREM, UT 84097, USA

Secured Parties

Name	Type	Action Type	Address
C T CORPORATION SYSTEM, AS REPRESENTATIVE	Organization	N/A	330 N BRAND BLVD, SUITE 700; ATTN: SPRS GLENDALE, CA 91203, USA

Collateral

"Debtor and Secured Party also hereby agree that the security pledged by Debtor as collateral for the underlying obligation includes the following: All current assets of the Debtor as of the enforcement date of this Security Instrument, including but not limited to cash, accounts receivable, other receivables, equipment, inventory, along with all trade fixtures belonging to the Debtor; all inclusive of after acquired property."

Filing #: 20251180932-0	Filing Date: 08/25/2025	Filing Type: Termination UCC-3	Page Count: 1
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Filing Chain#: 8
Original File#: 20241080345-3

Lapse Date: 08/15/2029
Lien Type: UCC Lien

Filing #: 20241080345-3 **Filing Date:** 08/15/2024 **Filing Type:** Initial Financing Statement UCC-1 **Page Count:** 1

Debtors

Name	Type	Action Type	Address
LEGALLY MINE, LLC	Organization	N/A	1337 EAST 750 NORTH OREM, UT 84097, USA

Secured Parties

Name	Type	Action Type	Address
C T CORPORATION SYSTEM, AS REPRESENTATIVE	Organization	N/A	330 N BRAND BLVD, SUITE 700; ATTN: SPRS GLENDALE, CA 91203, USA

Collateral

To secure the prompt and complete payment, performance and observance of all of the Obligations under any and/or all Agreement(s) between the Debtor and the Secured Party, the Debtor hereby grants, assigns, conveys, mortgages, pledges, hypothecates and transfers to the Secured Party, a Lien upon, and security interest in (the "Security Interest"), all of its right, title and interest in, to and under all of its assets and property, including, without limitation, the below mentioned items, whether now owned by or owing to, or hereafter acquired by, or arising in favor of, Debtor (including under any trade names, styles or derivations thereof), and whether owned or consigned by or to, or leased from or to, Debtor (all of which being hereinafter collectively referred to as the "Collateral"): (i) all Accounts; (ii) all Chattel Paper; (iii) all contracts; (iv) all Documents; (v) all Equipment; (vi) all Fixtures; (vii) all General Intangibles; (viii) all Goods; (ix) all Instruments; (x) all Inventory; (xi) all Investment Property; (xii) all money, cash or cash equivalents; (xiii) all Intellectual Property; (xiv) the Bank Account and all deposits therein, including all money, cash or cash equivalents therein; and to the extent not otherwise included in any of the foregoing, all Proceeds and products of the foregoing and all accessions to, substitutions and replacements for, and rents and profits of, each of the foregoing items mentioned above.

Filing #: 20261244281-1 **Filing Date:** 04/23/2026 **Filing Type:** Termination UCC-3 **Page Count:** 1



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Filing Chain#: 9
Original File#: 20251112783-2

Lapse Date: 01/03/2030
Lien Type: UCC Lien

Filing #: 20251112783-2	Filing Date: 01/03/2025	Filing Type: Initial Financing Statement UCC-1	Page Count: 3
<u>Debtors</u>			
Name	Type	Action Type	Address
LEGALLY MINE LLC	Organization	N/A	1337 E 750 N OREM, UT 84097, USA
Name	Type	Action Type	Address
LEGAL BEAR LLC	Organization	N/A	1337 E 750 N OREM, UT 84097, USA
Name	Type	Action Type	Address
LEGALLY MINE TAX AND ACCOUNTING, LLC	Organization	N/A	1337 E 750 N OREM, UT 84097, USA
Name	Type	Action Type	Address
PROCURE, LLC	Organization	N/A	1337 E 750 N OREM, UT 84097, USA
Name	Type	Action Type	Address
SHIELLD LLC	Organization	N/A	1337 E 750 N OREM, UT 84097, USA
Name	Type	Action Type	Address
TEAM DENTISTRY LLC	Organization	N/A	1337 E 750 N OREM, UT 84097, USA
Name	Type	Action Type	Address
DANIEL JAY MCNEFF	Individual	N/A	65 N PALISADE OREM, UT 84097, USA
<u>Secured Parties</u>			
Name	Type	Action Type	Address
C T CORPORATION SYSTEM, AS REPRESENTATIVE	Organization	N/A	330 N BRAND BLVD, SUITE 700; ATTN: SPRS GLENDALE, CA 91203, USA



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Collateral

Receivables - All assets now owned or hereafter acquired and wherever located, including but not limited to, the following subcategories of assets: a. Accounts, including but not limited to, credit card receivables; b. Chattel Paper; c. Inventory; d. Equipment; e. Instruments, including but not limited to, Promissory Notes; f. Investment Property; g. Documents; h. Deposit Accounts; i. Letter of Credit Rights; j. General Intangibles; k. Supporting Obligations; and i. Proceeds and Products of the foregoing. NOTICE PURSUANT TO AN AGREEMENT BETWEEN DEBTOR AND SECURED PARTY, DEBTOR HAS AGREED NOT TO FURTHER ENCUMBER THE COLLATERAL DESCRIBED HEREIN. THE FURTHER ENCUMBERING OF WHICH MAY CONSTITUTE THE TORTIOUS INTERFERENCE WITH THE SECURED PARTY'S RIGHT BY SUCH ENCUMBRANCES IN THE EVENT THAT ANY ENTITY IS GRANTED A SECURITY INTEREST IN DEBTOR'S ACCOUNTS, CHATTEL PAPER OR GENERAL INTANGIBLES CONTRARY TO THE ABOVE, THE SECURED PARTY ASSERTS A CLAIM TO ANY PROCEEDS THEREOF RECEIVED BY SUCH ENTITY.

Filing #: 20261247746-3

Filing Date: 05/07/2026

Filing Type: Termination
UCC-3

Page Count: 1



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Filing Chain#: 10
Original File#: 20251114026-3

Lapse Date: 01/08/2030
Lien Type: UCC Lien

Filing #: 20251114026-3	Filing Date: 01/08/2025	Filing Type: Initial Financing Statement UCC-1	Page Count: 1
<u>Debtors</u>			
Name	Type	Action Type	Address
LEGALLY MINE LLC	Organization	N/A	1337 E 750 N ST OREM, UT 84097, USA
Name	Type	Action Type	Address
DANIEL JAY MCNEFF	Individual	N/A	65 PALISADE DR OREM, UT 84097, USA
<u>Secured Parties</u>			
Name	Type	Action Type	Address
CT CORP AS REPRESENTATIVE	Organization	N/A	2433 KNAPP ST BROOKLYN, NY 11235, USA

Collateral

Receivables- All personal property of every kind and nature, including, without limitation, all accounts, contract rights, rights to the payment of money, insurance claims and proceeds, chattel paper, electric chattel paper, documents, instruments, securities and other investment property, deposit accounts, supporting obligations of every nature, and general intangibles, including without limitation, customer lists, and all books and records related thereto, and all recorded data of any kind and any nature, regardless of the medium of recording; together with, to the extent not listed above as the original collateral, all substitutions and replacements for and products of any of the foregoing property, and together with proceeds of any and all of the foregoing property. NOTICE PURSUANT TO AN AGREEMENT BETWEEN DEBTOR AND SECURED PARTY, DEBTOR HAS AGREED NOT TO FURTHER ENCUMBER THE COLLATERAL DESCRIBED HEREIN. THE FURTHER ENCUMBERING OF WHICH MAY CONSTITUTE THE TORTIOUS INTERFERENCE WITH THE SECURED PARTY'S RIGHT BY SUCH ENCUMBRANCES IN THE EVENT THAT ANY ENTITY IS GRANTED A SECURITY INTEREST IN DEBTOR'S ACCOUNTS, CHATTEL PAPER OR GENERAL INTANGIBLES CONTRARY TO THE ABOVE, THE SECURED PARTY ASSERTS A CLAIM TO ANY PROCEEDS THEREOF RECEIVED BY SUCH ENTITY.

Filing #: 20261240790-5	Filing Date: 04/13/2026	Filing Type: Termination UCC-3	Page Count: 1
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Filing Chain#: 11
Original File#: 2501271118060-8

Lapse Date: 01/24/2030
Lien Type: UCC Lien

Filing #: 2501271118060-8	Filing Date: 01/24/2025	Filing Type: Initial Financing Statement UCC-1	Page Count: 4
<u>Debtors</u>			
Name	Type	Action Type	Address
LEGALLY MINE, LLC	Organization	N/A	1337 EAST 750 NORTH STREET OREM, UT 84097, USA
Name	Type	Action Type	Address
TEAM DENTISTRY, LLC	Organization	N/A	1337 EAST 750 NORTH STREET OREM, UT 84097, USA
<u>Secured Parties</u>			
Name	Type	Action Type	Address
C T CORPORATION SYSTEM, AS REPRESENTATIVE	Organization	N/A	330 N BRAND BLVD, SUITE 700, ATTN SPRS GLENDALE, CA 91203, USA

Filing #: 20251195435-8	Filing Date: 10/20/2025	Filing Type: Termination UCC-3	Page Count: 1
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Filing Chain#: 12
Original File#: 20251132451-5

Lapse Date: 03/24/2030
Lien Type: UCC Lien

Filing #: 20251132451-5	Filing Date: 03/24/2025	Filing Type: Initial Financing Statement UCC-1	Page Count: 1
<u>Debtors</u>			
Name	Type	Action Type	Address
LEGALLY MINE, LLC	Organization	N/A	65 N PALISADE OREM, UT 84097, USA
Name	Type	Action Type	Address
DANIEL JAY MCNEFF	Individual	N/A	65 N PALISADE OREM, UT 84097, USA
<u>Secured Parties</u>			
Name	Type	Action Type	Address
CASTLE FUNDING CORP	Organization	N/A	5309 13TH AVE BROOKLYN, NY 11219, USA

Collateral

All accounts receivable, receipts, instruments, contract rights and other rights to receive the payment of money, patents, chattel paper, licenses, leases and general intangibles, whether now owned acquired or arising, and all of the debtor's books and records relating to any of the foregoing.

Filing #: 20261240845-2	Filing Date: 04/13/2026	Filing Type: Termination UCC-3	Page Count: 1
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Filing Chain#: 13
Original File#: 20251161061-9

Lapse Date: 06/20/2030
Lien Type: UCC Lien

Filing #: 20251161061-9	Filing Date: 06/20/2025	Filing Type: Initial Financing Statement UCC-1	Page Count: 1
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Debtors

Name	Type	Action Type	Address
LEGALLY MINE LLC	Organization	N/A	1337 E 750 N OREM, UT 84097, USA

Secured Parties

Name	Type	Action Type	Address
CORPORATION SERVICE COMPANY, AS REPRESENTATIVE	Organization	N/A	PO BOX 2576, UCCSPREP@CSCGLOBAL.COM SPRINGFIELD, IL 62708, USA

Collateral

"Future Receipts" sold by Debtor to Secured Party. "Future Receipts" means any payments received by Debtor from customers and other third-parties in exchange for Debtor's goods or services (in any form including, but not limited to, cash, check, payment card, and electronic transfers). Debtor & Secured Party intend that the sale of Future Receipts is a sale and not an assignment for security or a financing. Pursuant to the agreement between Secured Party and Debtor, Debtor is prohibited from transferring any Future Receipts to any other person or entity, granting any security interests in its accounts receivables, or obtaining any financing that impairs the value of the Future Receipts or Secured Party's right to collect the same until Secured Party has received all amounts due to it.

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 USA

Filed in the Office of <i>J. Veillette</i> Director, Division of Corporations and Commercial Code	Initial Filing Number 2021789704-3
	Filed On 7/17/2021 6:05:01 AM
	Lapse Date 7/17/2026
	Number of Pages 1

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 10 of the Financing Statement Addendum (Form UCC1Ad)

OR	1a. ORGANIZATION'S NAME LEGALLY MINE, LLC				
	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 1337 East 250 North		CITY Prem	STATE UT	POSTAL CODE 84097	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 10 of the Financing Statement Addendum (Form UCC1Ad)

OR	2a. ORGANIZATION'S NAME				
	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)

OR	3a. ORGANIZATION'S NAME SECURED LENDER SOLUTIONS				
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS P.O. BOX 2576		CITY Springfield	STATE IL	POSTAL CODE 62708	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

All presently existing or hereafter arising, now owned or hereafter acquired assets of the debtor. THE SECURED PARTY NAMED IN THIS RECORD IS ACTING IN A REPRESENTATIVE CAPACITY FOR PURPOSES OF FORWARDING NOTICES and INQUIRIES REGARDING THIS RECORD. FOR MORE INFORMATION, PLEASE CONTACT THE SECURED PARTY AT THE ADDRESS LISTED ABOVE OR AT UCCSPREP@CSCINFO.COM.

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): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

2145 63500:214563500

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) UNISEARCH, INC.
B. E-MAIL CONTACT AT FILER (optional) kris.chavez@unisearch.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) UNISEARCH, INC. 1780 BARNES BLVD WA 98512 USA

Filed in the Office of <i>J. Veillette</i> Director, Division of Corporations and Commercial Code	Filing Number 210827800456-3
	Initial Filing Number 210827800456-3
	Filed On August 27, 2021 09:32 AM
	Lapse Date 08/27/2026
	Number of Pages 1

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 10 of the Financing Statement Addendum (Form UCC1Ad)

OR	1a. ORGANIZATION'S NAME LEGALLY MINE LLC			
	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 1337 EAST 750 NORTH		CITY OREM	STATE UT	POSTAL CODE 84097
			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 10 of the Financing Statement Addendum (Form UCC1Ad)

OR	2a. ORGANIZATION'S NAME			
	2b. INDIVIDUAL'S SURNAME MCNEFF	FIRST PERSONAL NAME DANIEL	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS 14832 VINTAGE VIEW LANE		CITY DRAPER	STATE UT	POSTAL CODE 84020
			COUNTRY USA	

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

OR	3a. ORGANIZATION'S NAME FAVO FUNDING LLC			
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 1025 OLD COUNTRY ROAD, SUITE 311		CITY WESTBURY	STATE NY	POSTAL CODE 11590
			COUNTRY USA	

4. COLLATERAL: This financing statement covers the following collateral:

LEGALLY MINE LLC HAS SOLD IT'S FUTURE RECEIVABLES OF \$123,250 TO FAVO FUNDING LLC FOR \$85,000. PAYING FAVO FUNDING BACK AT A RATE OF \$880.36 FOR A PERIOD OF 140 DAYS.

THIS STATEMENT IS PURSUANT TO THE TERMS OF A PAYMENT RIGHTS PURCHASE AND SALE AGREEMENT DATED 8/23/2021 BETWEEN THE DEBTOR AND THE SECURED PARTY AS EXECUTED.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and Instructions) ☐ being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: ☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility	6b. Check <u>only</u> if applicable and check <u>only</u> one box: ☐ Agricultural Lien ☐ Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA:	

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) UNISEARCH, INC.
B. E-MAIL CONTACT AT FILER (optional) kris.chavez@unisearch.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) UNISEARCH, INC. 1780 BARNES BLVD WA 98512 USA

Filed in the Office of <i>J. Veillette</i> Director, Division of Corporations and Commercial Code	Filing Number 210827800457-0 Initial Filing Number 210827800457-0 Filed On August 27, 2021 09:32 AM Lapse Date 08/27/2026 Number of Pages 1
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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 10 of the Financing Statement Addendum (Form UCC1Ad)

OR	1a. ORGANIZATION'S NAME LEGALLY MINE LLC			
	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1337 EAST 750 NORTH	OREM	UT	84097	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 10 of the Financing Statement Addendum (Form UCC1Ad)

OR	2a. ORGANIZATION'S NAME			
	2b. INDIVIDUAL'S SURNAME MCNEFF	FIRST PERSONAL NAME DANIEL	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
14832 VINTAGE VIEW LANE	DRAPER	UT	84020	USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

OR	3a. ORGANIZATION'S NAME FAVO FUNDING LLC			
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1025 OLD COUNTRY ROAD, SUITE 311	WESTBURY	NY	11590	USA

4. COLLATERAL: This financing statement covers the following collateral:

LEGALLY MINE LLC HAS SOLD IT'S FUTURE RECEIVABLES OF \$140,000 TO FAVO FUNDING LLC FOR \$100,000. PAYING FAVO FUNDING LLC BACK AT A RATE OF \$700.00 FOR A PERIOD OF 200 DAYS.

THIS STATEMENT IS PURSUANT TO THE TERMS OF A PAYMENT RIGHTS PURCHASE AND SALE AGREEMENT DATED 07/20/2021 BETWEEN THE DEBTOR AND THE SECURED PARTY AS EXECUTED.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and Instructions) ☐ being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: ☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility	6b. Check <u>only</u> if applicable and check <u>only</u> one box: ☐ Agricultural Lien ☐ Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA:	

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) UNISEARCH
B. E-MAIL CONTACT AT FILER (optional) megan.brannberg@unisearch.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) UNISEARCH 1780 Barnes Boulevard SW Tumwater WA 98512 USA

Filed in the Office of <i>J. Veillette</i> Director, Division of Corporations and Commercial Code Filed in the state of Utah	Filing Number 230913990881-9 Initial Filing Number 210827800456-3 Filed On September 13, 2023 11:03 AM Lapse Date 08/27/2026 Number of Pages 1
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1a. INITIAL FINANCING STATEMENT FILE NUMBER 210827800456-3	1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13
--	--

2. ☒ TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☐ ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☐ CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ PARTY INFORMATION CHANGE:
Check one of these two boxes: AND Check one of these three boxes to:
This Change affects ☐ Debtor or ☐ Secured Party of record ☐ CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c ☐ ADD name: Complete item 7a or 7b, and item 7c ☐ DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S SURNAME			
	INDIVIDUAL'S FIRST PERSONAL NAME			
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

8. ☐ COLLATERAL CHANGE: Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral
Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME FAVO FUNDING, LLC				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA:
DEBTORLEGALLY MINE LLC/ DANIEL MCNEFF

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) UNISEARCH
B. E-MAIL CONTACT AT FILER (optional) megan.brannberg@unisearch.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) UNISEARCH 1780 Barnes Boulevard SW Tumwater WA 98512 USA

Filed in the Office of <i>J. Veillette</i> Director, Division of Corporations and Commercial Code Filed in the state of Utah	Filing Number 230928994603-5 Initial Filing Number 210827800456-3 Filed On September 28, 2023 05:11 PM Lapse Date 08/27/2026 Number of Pages 1
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1a. INITIAL FINANCING STATEMENT FILE NUMBER 210827800456-3	1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13
--	--

2. ☒ TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☐ ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☐ CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ PARTY INFORMATION CHANGE:
Check one of these two boxes: AND Check one of these three boxes to:
This Change affects ☐ Debtor or ☐ Secured Party of record ☐ CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c ☐ ADD name: Complete item 7a or 7b, and item 7c ☐ DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S SURNAME			
	INDIVIDUAL'S FIRST PERSONAL NAME			
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

8. ☐ COLLATERAL CHANGE: Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral
Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME FAVO FUNDING, LLC				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA:
DEBTORLEGALLY MINE LLC/ DANIEL MCNEFF

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Wolters Kluwer Lien Solutions 800-331-3282	Filed in the Office of <i>J. Veillette</i> Director, Division of Corporations and Commercial Code	Initial Filing Number 20241017894-5
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com		Filed On 1/17/2024 11:28:08 AM
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 USA		Lapse Date 1/17/2029
		Number of Pages 1

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 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME LEGALLY MINE, LLC				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 1337 E 750 N	CITY OREM	STATE UT	POSTAL CODE 84097	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 10 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 C T Corporation System, as representative				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 330 N Brand Blvd, Suite 700, Attn: SPRS	CITY Glendale	STATE CA	POSTAL CODE 91203	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

Secured Party has purchased certain "Future Receipts" from Debtor. "Future Receipts" means all payments made to Debtor by cash, check, ACH or other electronic transfer, credit card, debit card, bank card, charge card or other form of monetary payment in the ordinary course of Debtor's business. Notice: Pursuant to the agreement between Debtor and Secured Party, Debtor is prohibited from obtaining any financing that impairs the value of the Future Receipts or Secured Party's right to collect same. In the event that any entity is granted a security interest in Debtor's Future Receipts contrary to the above, the Secured Party asserts a claim to any proceeds thereof received by such entity. As per the FUTURE RECEIVABLES SALE AGREEMENT, the Secured Party has a security interest in all of Debtor's present and future accounts, chattel paper, deposit accounts, documents, personal property, assets and fixtures, general intangibles, instruments and inventory whenever located, equipment, and proceeds now or hereafter owned or acquired by Debtor.

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): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

96938824

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Wolters Kluwer Lien Solutions 800-331-3282
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 USA

Filed in the Office of <i>J. Veillette</i> Director, Division of Corporations and Commercial Code	Initial Filing Number 20241048876-8
	Filed On 5/16/2024 2:54:09 PM
	Lapse Date 5/16/2029
	Number of Pages 1

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 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME Legally Mine LLC				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
1c. MAILING ADDRESS 1337 East 750 North	CITY Orem	STATE UT	POSTAL CODE 84097	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 10 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 C T Corporation System, as representative				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3c. MAILING ADDRESS 330 N Brand Blvd, Suite 700; Attn: SPRS	CITY Glendale	STATE CA	POSTAL CODE 91203	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

"Debtor and Secured Party also hereby agree that the security pledged by Debtor as collateral for the underlying obligation includes the following: All current assets of the Debtor as of the enforcement date of this Security Instrument, including but not limited to cash, accounts receivable, other receivables, equipment, inventory, along with all trade fixtures belonging to the Debtor; all inclusive of after acquired property."

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): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

98920043

FILING OFFICE COPY — UCC FINANCING STATEMENT (Form UCC1) (Rev. 04/20/11)

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Wolters Kluwer Lien Solutions 800-331-3282	Filed in the Office of <i>J. Veillette</i>	Initial Filing Number 20241080345-3
	Director, Division of	Filed On 8/15/2024 4:31:26 PM
	Corporations and	Lapse Date 8/15/2029
	Commercial Code	Number of Pages 1
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com		
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 USA		

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 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME Legally Mine, LLC				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 1337 East 750 North		CITY Orem	STATE UT	POSTAL CODE 84097
			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 10 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 C T Corporation System, as representative				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 330 N Brand Blvd, Suite 700; Attn: SPRS		CITY Glendale	STATE CA	POSTAL CODE 91203
			COUNTRY USA	

4. COLLATERAL: This financing statement covers the following collateral:

To secure the prompt and complete payment, performance and observance of all of the Obligations under any and/or all Agreement(s) between the Debtor and the Secured Party, the Debtor hereby grants, assigns, conveys, mortgages, pledges, hypothecates and transfers to the Secured Party, a Lien upon, and security interest in (the "Security Interest"), all of its right, title and interest in, to and under all of its assets and property, including, without limitation, the below mentioned items, whether now owned by or owing to, or hereafter acquired by, or arising in favor of, Debtor (including under any trade names, styles or derivations thereof), and whether owned or consigned by or to, or leased from or to, Debtor (all of which being hereinafter collectively referred to as the "Collateral"): (i) all Accounts; (ii) all Chattel Paper; (iii) all contracts; (iv) all Documents; (v) all Equipment; (vi) all Fixtures; (vii) all General Intangibles; (viii) all Goods; (ix) all Instruments; (x) all Inventory; (xi) all Investment Property; (xii) all money, cash or cash equivalents; (xiii) all Intellectual Property; (xiv) the Bank Account and all deposits therein, including all money, cash or cash equivalents therein; and to the extent not otherwise included in any of the foregoing, all Proceeds and products of the foregoing and all accessions to, substitutions and replacements for, and rents and profits of, each of the foregoing items mentioned above.

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): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensors

8. OPTIONAL FILER REFERENCE DATA:

100262811

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Wolters Kluwer Lien Solutions 800-331-3282	Filed in the Office of <i>Adam Watson</i> Director, Division of Corporations and Commercial Code	Initial Filing Number 20251112783-2
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com		Filed On 1/3/2025 7:04:34 AM
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 USA		Lapse Date 1/3/2030
		Number of Pages 3

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 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME LEGALLY MINE LLC				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
1c. MAILING ADDRESS 1337 E 750 N	CITY OREM	STATE UT	POSTAL CODE 84097	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 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME LEGAL BEAR LLC				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
2c. MAILING ADDRESS 1337 E 750 N	CITY OREM	STATE UT	POSTAL CODE 84097	COUNTRY USA

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 C T CORPORATION SYSTEM, AS REPRESENTATIVE				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3c. MAILING ADDRESS 330 N Brand Blvd, Suite 700; Attn: SPRS	CITY Glendale	STATE CA	POSTAL CODE 91203	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

Receivables - All assets now owned or hereafter acquired and wherever located, including but not limited to, the following subcategories of assets: a. Accounts, including but not limited to, credit card receivables; b. Chattel Paper; c. Inventory; d. Equipment; e. Instruments, including but not limited to, Promissory Notes; f. Investment Property; g. Documents; h. Deposit Accounts; i. Letter of Credit Rights; j. General Intangibles; k. Supporting Obligations; and l. Proceeds and Products of the foregoing. NOTICE PURSUANT TO AN AGREEMENT BETWEEN DEBTOR AND SECURED PARTY, DEBTOR HAS AGREED NOT TO FURTHER ENCUMBER THE COLLATERAL DESCRIBED HEREIN. THE FURTHER ENCUMBERING OF WHICH MAY CONSTITUTE THE TORTIOUS INTERFERENCE WITH THE SECURED PARTY'S RIGHT BY SUCH ENCUMBRANCES IN THE EVENT THAT ANY ENTITY IS GRANTED A SECURITY INTEREST IN DEBTOR'S ACCOUNTS, CHATTEL PAPER OR GENERAL INTANGIBLES CONTRARY TO THE ABOVE, THE SECURED PARTY ASSERTS A CLAIM TO ANY PROCEEDS THEREOF RECEIVED BY SUCH ENTITY.

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): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

102331292

UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

18. 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 ☐

18a. ORGANIZATION'S NAME LEGALLY MINE LLC	
OR	
18b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

19. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (19a or 19b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

19a. ORGANIZATION'S NAME LEGALLY MINE TAX AND ACCOUNTING, LLC				
OR				
19b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
19c. MAILING ADDRESS 1337 E 750 N		CITY OREM	STATE UT	POSTAL CODE 84097
			COUNTRY USA	

20. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (20a or 20b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

20a. ORGANIZATION'S NAME PROCURE, LLC				
OR				
20b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
20c. MAILING ADDRESS 1337 E 750 N		CITY OREM	STATE UT	POSTAL CODE 84097
			COUNTRY USA	

21. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21a or 21b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

21a. ORGANIZATION'S NAME SHIELLD LLC				
OR				
21b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
21c. MAILING ADDRESS 1337 E 750 N		CITY OREM	STATE UT	POSTAL CODE 84097
			COUNTRY USA	

22. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (22a or 22b)

22a. ORGANIZATION'S NAME				
OR				
22b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
22c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
			COUNTRY	

23. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (23a or 23b)

23a. ORGANIZATION'S NAME				
OR				
23b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
23c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
			COUNTRY	

24. MISCELLANEOUS:

UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

18. 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 ☐

18a. ORGANIZATION'S NAME LEGALLY MINE LLC	
OR	
18b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

19. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (19a or 19b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

19a. ORGANIZATION'S NAME TEAM DENTISTRY LLC				
OR				
19b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
19c. MAILING ADDRESS 1337 E 750 N		CITY OREM	STATE UT	POSTAL CODE 84097
			COUNTRY USA	

20. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (20a or 20b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

20a. ORGANIZATION'S NAME				
OR				
20b. INDIVIDUAL'S SURNAME MCNEFF	FIRST PERSONAL NAME DANIEL JAY	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
20c. MAILING ADDRESS 65 N PALISADE		CITY OREM	STATE UT	POSTAL CODE 84097
			COUNTRY USA	

21. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21a or 21b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

21a. ORGANIZATION'S NAME				
OR				
21b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
21c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
			COUNTRY	

22. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (22a or 22b)

22a. ORGANIZATION'S NAME				
OR				
22b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
22c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
			COUNTRY	

23. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (23a or 23b)

23a. ORGANIZATION'S NAME				
OR				
23b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
23c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
			COUNTRY	

24. MISCELLANEOUS:

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Wolters Kluwer Lien Solutions 800-331-3282	Filed in the Office of <i>Adam Watson</i> Director, Division of Corporations and Commercial Code	Initial Filing Number 20251114026-3
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com		Filed On 1/8/2025 1:04:50 PM
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 USA		Lapse Date 1/8/2030
		Number of Pages 1

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 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME Legally Mine LLC				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
1c. MAILING ADDRESS 1337 E 750 N St	CITY Orem	STATE UT	POSTAL CODE 84097	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 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME Mcneff	FIRST PERSONAL NAME Daniel	ADDITIONAL NAME(S)/INITIAL(S) Jay		SUFFIX
2c. MAILING ADDRESS 65 Palisade Dr	CITY Orem	STATE UT	POSTAL CODE 84097	COUNTRY USA

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 CT Corp as representative				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3c. MAILING ADDRESS 2433 Knapp St	CITY Brooklyn	STATE NY	POSTAL CODE 11235	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:
Receivables- All personal property of every kind and nature, including, without limitation, all accounts, contract rights, rights to the payment of money, insurance claims and proceeds, chattel paper, electric chattel paper, documents, instruments, securities and other investment property, deposit accounts, supporting obligations of every nature, and general intangibles, including without limitation, customer lists, and all books and records related thereto, and all recorded data of any kind and any nature, regardless of the medium of recording; together with, to the extent not listed above as the original collateral, all substitutions and replacements for and products of any of the foregoing property, and together with proceeds of any and all of the foregoing property. NOTICE PURSUANT TO AN AGREEMENT BETWEEN DEBTOR AND SECURED PARTY, DEBTOR HAS AGREED NOT TO FURTHER ENCUMBER THE COLLATERAL DESCRIBED HEREIN. THE FURTHER ENCUMBERING OF WHICH MAY CONSTITUTE THE TORTIOUS INTERFERENCE WITH THE SECURED PARTY'S RIGHT BY SUCH ENCUMBRANCES IN THE EVENT THAT ANY ENTITY IS GRANTED A SECURITY INTEREST IN DEBTOR'S ACCOUNTS, CHATTEL PAPER OR GENERAL INTANGIBLES CONTRARY TO THE ABOVE, THE SECURED PARTY ASSERTS A CLAIM TO ANY PROCEEDS THEREOF RECEIVED BY SUCH ENTITY.

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 <u>only</u> , if applicable and check <u>only</u> one box: ☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility	6b. Check <u>only</u> , if applicable and check <u>only</u> one box: ☐ Agricultural Lien ☐ Non-UCC Filing
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7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensors

8. OPTIONAL FILER REFERENCE DATA:
102397040

Date: 01/24/2025

Receipt Number: 10913057

Amount Paid: \$48.00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)
Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141

B. E-MAIL CONTACT AT SUBMITTER (optional)
uccfilingreturn@wolterskluwer.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Lien Solutions
P.O. Box 29071
Glendale, CA 91209-9071

102597472
UTUT

File with: Div of Corp and Commercial, UT

SEE BELOW FOR SECURED PARTY CONTACT INFORMATION

Filed in the Office of <i>Adam Watson</i>	Filing Number 2501271118060-8
Director, Division of Corporations and Commercial Code	Initial Filing Number 2501271118060-8
Filed in the state of Utah	Filed On January 24, 2025 04:00 PM
	Lapse Date 01/24/2030
	Number of Pages 4

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 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME LEGALLY MINE, LLC				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1337 East 750 North Street	Orem	UT	84097	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 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME TEAM DENTISTRY, LLC				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1337 East 750 North Street	Orem	UT	84097	USA

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 C T Corporation System, as representative				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
330 N Brand Blvd, Suite 700, Attn SPRS	Glendale	CA	91203	USA

4. COLLATERAL: This financing statement covers the following collateral:

Secured Party has purchased certain "Future Receipts" from Debtor. "Future Receipts" includes all payments received by Seller, or its right to receive such payments, in the ordinary course of Seller's business, including but not limited to (a)

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): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

102597472

Date: 01/24/2025

Receipt Number: 10913057

Amount Paid: \$48.00

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

LEGALLY MINE, 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):

payments made by cash, check, Automated Clearing House ("ACH") or other electronic transfer; (b) payments, or rights to payments, made by credit card, debit card, bank card, charge card; (c) accounts and payment intangibles; and (d) payments made by

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):

16. Description of real estate:

Date: 01/24/2025

Receipt Number: 10913057

Amount Paid: \$48.00

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

LEGALLY MINE, 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):
any other form.

Notice: Pursuant to the agreement between Debtor and Secured Party, Debtor is prohibited from obtaining any financing that impairs the value of the Future Receipts or Secured Party's right to collect same.

In the event that any

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):

16. Description of real estate:

Date: 01/24/2025

Receipt Number: 10913057

Amount Paid: \$48.00

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

LEGALLY MINE, 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):

entity is granted a security interest in the Future Receipts contrary to the above, the Secured Party asserts a claim to any proceeds thereof received by such entity.

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):

16. Description of real estate:

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) CSC 801 Adlai Stevenson Drive Springfield, IL 62703 USA

Filed in the Office of <i>Adam Watson</i> Director, Division of Corporations and Commercial Code	Initial Filing Number 20251132451-5
	Filed On 3/24/2025 12:23:17 PM
	Lapse Date 3/24/2030
	Number of Pages 1

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 10 of the Financing Statement Addendum (Form UCC1Ad)

OR	1a. ORGANIZATION'S NAME LEGALLY MINE, LLC				
	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 65 N PALISADE		CITY OREM	STATE UT	POSTAL CODE 84097	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 10 of the Financing Statement Addendum (Form UCC1Ad)

OR	2a. ORGANIZATION'S NAME				
	2b. INDIVIDUAL'S SURNAME MCNEFF	FIRST PERSONAL NAME DANIEL	ADDITIONAL NAME(S)/INITIAL(S) JAY	SUFFIX	
2c. MAILING ADDRESS 65 N PALISADE		CITY OREM	STATE UT	POSTAL CODE 84097	COUNTRY USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

OR	3a. ORGANIZATION'S NAME CASTLE FUNDING CORP				
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 5309 13TH AVE		CITY BROOKLYN	STATE NY	POSTAL CODE 11219	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

All accounts receivable, receipts, instruments, contract rights and other rights to receive the payment of money, patents, chattel paper, licenses, leases and general intangibles, whether now owned acquired or arising, and all of the debtor's books and records 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): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

1892786

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294 B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 USA	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 60%; padding: 5px;">Filed in the Office of <i>Adam Watson</i> Director, Division of Corporations and Commercial Code</td><td style="width: 40%; padding: 5px;">Initial Filing Number 20251161061-9</td></tr><tr><td rowspan="3" style="padding: 5px;"></td><td style="padding: 5px;">Filed On 6/20/2025 7:26:08 AM</td></tr><tr><td style="padding: 5px;">Lapse Date 6/20/2030</td></tr><tr><td style="padding: 5px;">Number of Pages 1</td></tr></table>	Filed in the Office of <i>Adam Watson</i> Director, Division of Corporations and Commercial Code	Initial Filing Number 20251161061-9		Filed On 6/20/2025 7:26:08 AM	Lapse Date 6/20/2030	Number of Pages 1
Filed in the Office of <i>Adam Watson</i> Director, Division of Corporations and Commercial Code	Initial Filing Number 20251161061-9						
	Filed On 6/20/2025 7:26:08 AM						
	Lapse Date 6/20/2030						
	Number of Pages 1						

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 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME Legally Mine LLC				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 1337 E 750 N	CITY Orem	STATE UT	POSTAL CODE 84097	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 10 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 Corporation Service Company, As Representative				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS PO Box 2576, UCCSPrep@CSCGLOBAL.COM	CITY Springfield	STATE IL	POSTAL CODE 62708	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:
"Future Receipts" sold by Debtor to Secured Party. "Future Receipts" means any payments received by Debtor from customers and other third-parties in exchange for Debtor's goods or services (in any form including, but not limited to, cash, check, payment card, and electronic transfers). Debtor & Secured Party intend that the sale of Future Receipts is a sale and not an assignment for security or a financing. Pursuant to the agreement between Secured Party and Debtor, Debtor is prohibited from transferring any Future Receipts to any other person or entity, granting any security interests in its accounts receivables, or obtaining any financing that impairs the value of the Future Receipts or Secured Party's right to collect the same until Secured Party has received all amounts due to it.

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 <u>only</u> , if applicable and check <u>only</u> one box: ☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility	6b. Check <u>only</u> , if applicable and check <u>only</u> one box: ☐ Agricultural Lien ☐ Non-UCC Filing
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7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensors

8. OPTIONAL FILER REFERENCE DATA:
3158 61854:315861854

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Wolters Kluwer Lien Solutions 800-331-3282
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 USA

Filed in the Office of <i>Alan Watson</i>	Document Number 20251180932-0
Director, Division of Corporations and Commercial Code	Filed Date and Time 8/25/2025 7:17:23 AM
	Number of Pages 1

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 20241048876-8	1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13
---	--

2. ☒ **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☐ **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☐ **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ **PARTY INFORMATION CHANGE:**
Check one of these two boxes: AND Check one of these three boxes to:
☐ CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c
☐ ADD name: Complete item 7a or 7b, and item 7c
☐ DELETE name: Give record name to be deleted in item 6a or 6b
This Change affects ☐ Debtor or ☐ Party of record

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S SURNAME			
	INDIVIDUAL'S FIRST PERSONAL NAME			
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX
7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

8. ☐ **COLLATERAL CHANGE:** Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME C T Corporation System, as representative				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. **OPTIONAL FILER REFERENCE DATA:**
105497643- Debtor: Legally Mine LLC

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Wolters Kluwer Lien Solutions 800-331-3282	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%; vertical-align: top;">Filed in the Office of <i>Alan Watson</i> Director, Division of Corporations and Commercial Code</td><td style="width: 50%; vertical-align: top;">Document Number 20251195435-8 Filed Date and Time 10/20/2025 11:00:50 AM Number of Pages 1</td></tr></table>	Filed in the Office of <i>Alan Watson</i> Director, Division of Corporations and Commercial Code	Document Number 20251195435-8 Filed Date and Time 10/20/2025 11:00:50 AM Number of Pages 1
Filed in the Office of <i>Alan Watson</i> Director, Division of Corporations and Commercial Code	Document Number 20251195435-8 Filed Date and Time 10/20/2025 11:00:50 AM Number of Pages 1		
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com			
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 USA			

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 2501271118060-8	1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13
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2. ☒ **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☐ **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☐ **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ **PARTY INFORMATION CHANGE:**
Check one of these two boxes: AND Check one of these three boxes to:

Check one of these two boxes:
☐ Debtor or ☐ Party of record

☐ CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c

☐ ADD name: Complete item 7a or 7b, and item 7c

☐ DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S SURNAME			
	INDIVIDUAL'S FIRST PERSONAL NAME			
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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8. ☐ **COLLATERAL CHANGE:** Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME C T Corporation System, as representative				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. **OPTIONAL FILER REFERENCE DATA:**
106242804- Debtor: LEGALLY MINE, LLC

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Wolters Kluwer Lien Solutions 800-331-3282
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 USA

Filed in the Office of <i>Scott Whitaker</i>	Document Number 20261240790-5
Director, Division of Corporations and Commercial Code	Filed Date and Time 4/13/2026 9:53:31 AM
	Number of Pages 1

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 20251114026-3	1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13
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2. ☒ **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☐ **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☐ **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ **PARTY INFORMATION CHANGE:**
Check one of these two boxes: AND Check one of these three boxes to:
☐ CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c
☐ ADD name: Complete item 7a or 7b, and item 7c
☐ DELETE name: Give record name to be deleted in item 6a or 6b
This Change affects ☐ Debtor or ☐ Party of record

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S SURNAME			
	INDIVIDUAL'S FIRST PERSONAL NAME			
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

8. ☐ **COLLATERAL CHANGE:** Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME CT Corp as representative				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. **OPTIONAL FILER REFERENCE DATA:**
108490082- Debtor: Legally Mine LLC

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%; vertical-align: top;">Filed in the Office of <i>Scott Whitaker</i> Director, Division of Corporations and Commercial Code</td><td style="width: 50%; vertical-align: top;">Document Number 20261240845-2 Filed Date and Time 4/13/2026 10:57:17 AM Number of Pages 1</td></tr></table>		Filed in the Office of <i>Scott Whitaker</i> Director, Division of Corporations and Commercial Code	Document Number 20261240845-2 Filed Date and Time 4/13/2026 10:57:17 AM Number of Pages 1
Filed in the Office of <i>Scott Whitaker</i> Director, Division of Corporations and Commercial Code	Document Number 20261240845-2 Filed Date and Time 4/13/2026 10:57:17 AM Number of Pages 1				
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY			
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) CSC 801 Adlai Stevenson Drive Springfield, IL 62703 USA					

1a. INITIAL FINANCING STATEMENT FILE NUMBER 20251132451-5	1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13
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2. ☒ **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☐ **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☐ **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ **PARTY INFORMATION CHANGE:**
Check one of these two boxes: AND Check one of these three boxes to:

This Change affects ☐ Debtor <u>or</u> ☐ Party of record	☐ CHANGE name and/or address: Complete item 6a or 6b; <u>and</u> item 7a or 7b <u>and</u> item 7c	☐ ADD name: Complete item 7a or 7b, <u>and</u> item 7c	☐ DELETE name: Give record name to be deleted in item 6a or 6b
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6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME			
OR			
6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME			
OR			
7b. INDIVIDUAL'S SURNAME			
INDIVIDUAL'S FIRST PERSONAL NAME			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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8. ☐ **COLLATERAL CHANGE:** Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME CASTLE FUNDING CORP			
OR			
9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. **OPTIONAL FILER REFERENCE DATA:**
6023184

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Wolters Kluwer Lien Solutions 800-331-3282
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 USA

Filed in the Office of <i>Scott Whitaker</i>	Document Number 20261244281-1
Director, Division of Corporations and Commercial Code	Filed Date and Time 4/23/2026 12:49:24 PM
	Number of Pages 1

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 20241080345-3	1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13
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2. ☒ **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☐ **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☐ **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ **PARTY INFORMATION CHANGE:**
Check one of these two boxes: AND Check one of these three boxes to:
☐ CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c
☐ ADD name: Complete item 7a or 7b, and item 7c
☐ DELETE name: Give record name to be deleted in item 6a or 6b
This Change affects ☐ Debtor or ☐ Party of record

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S SURNAME			
	INDIVIDUAL'S FIRST PERSONAL NAME			
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

8. ☐ **COLLATERAL CHANGE:** Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME C T Corporation System, as representative				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. **OPTIONAL FILER REFERENCE DATA:**
108694514- Debtor: Legally Mine, LLC

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Wolters Kluwer Lien Solutions 800-331-3282
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com
C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 USA

Filed in the Office of <i>Scott Whitaker</i>	Document Number 20261247746-3
Director, Division of Corporations and Commercial Code	Filed Date and Time 5/7/2026 9:05:34 AM
	Number of Pages 1

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 20251112783-2	1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13
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2. ☒ **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☐ **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
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4. ☐ **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ **PARTY INFORMATION CHANGE:**
Check one of these two boxes: AND Check one of these three boxes to:
☐ CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c
☐ ADD name: Complete item 7a or 7b, and item 7c
☐ DELETE name: Give record name to be deleted in item 6a or 6b
This Change affects ☐ Debtor or ☐ Party of record

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S SURNAME			
	INDIVIDUAL'S FIRST PERSONAL NAME			
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

8. ☐ **COLLATERAL CHANGE:** Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME C T CORPORATION SYSTEM, AS REPRESENTATIVE				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. **OPTIONAL FILER REFERENCE DATA:**
108879624- Debtor: LEGALLY MINE LLC