

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Stephen Ybarra	9497600404
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
KNOBBE, MARTENS, OLSON & BEAR, LLP	
2040 MAIN STREET	
14TH FLOOR	
IRVINE CA 92614	

DELAWARE DEPARTMENT OF STATE
U.C.C. FILING SECTION
FILED 02:20 PM 04/13/2009
INITIAL FILING # 2009 1166203

SRV: 090356606

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> debtor name (1a or 1b) - do not abbreviate or combine names					
1a. ORGANIZATION'S NAME ASSURELEASE LLC					
OR	1b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 448 62ND STREET		CITY NEWPORT BEACH	STATE CA	POSTAL CODE 92663	COUNTRY US
	1e. TYPE OF ORGANIZATION LTD LIABILITY COMPANY		1f. JURISDICTION OF ORGANIZATION DE		
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> debtor name (2a or 2b) - do not abbreviate or combine names					
2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
	2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only <u>one</u> secured party name (3a or 3b)					
3a. ORGANIZATION'S NAME KNOBBE, MARTENS, OLSON, & BEAR, LLP					
OR	3b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS 2040 MAIN STREET, 14TH FLOOR		CITY IRVINE	STATE CA	POSTAL CODE 92614	COUNTRY US
4. This FINANCING STATEMENT covers the following collateral: Collateral Description - please see attachment					

10. miscellaneous: LEPIR

6. <input type="checkbox"/> The FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

LEPIR