1. Type form. 2. If space is inadequate continue on additional sheet. 3. Enclose filling fee. 4. Filings in the Secretary of State's Office must contain either the debtor's federal employer identification number or social security number. Prepaid account number Debtor (if individual, last name first) and address: 1. Debtor (if individual, last name first) and address: WAYNE POSTOAK CONTRACTOR, INC DBA DOUBLE P COMMUNICATIONS, LLC 454 NORTH IOWA LAWRENCE, KS 66044 or SSN or SSN 0987895 For filing officer 2. Secured Party and address (there may be more than one): (Type information inside gray area) Security Leasing Services, Inc 8341 N.W. Mace Road, Suite 200 Kansas City, Missouri 64152 3. Assignee and address if applicable Bank of Blue Valley P.O. Box 26128 Overland Park, Kansas 66225 4. Mark, if applicable: [] Products of collateral are also covered [] The debtor is a transmitting utility 5. (a) This financing statement covers the following types (or items) of property: (Describe) 1995 CHEVROLET C3500 PICKUP ONE: EQUIPMENT LOCATION: 219 N. MULLEN ROAD SERIAL NUMBER: 1GBKC34F8SJ117469 BELTON, MO 64012 (b) If collateral is crops, the above described crops are growing or are to be grown on: (Describe real estate) (c) If applicable, the above (goods are to be come fixtures on:) (timber is standing on:) (minerals or the like, including oil and gas, or accounts will be financed at the wellhead or minehead of the well or mine located on:) (Legal description of real estate) Name of record owner: 6. If filing without debtor signature items a, b, c or d must be marked: a. [] Collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location is changed to this state. b. [] Collateral is proceeds of the original collateral in which a security interest was perfected] Collateral as to which the filing has lapsed. d. [] The filing covers collateral acquired after a change of name identity or corporate structure of debtor WAYNE POSTOAK CONTRACTOR, INC. DBA Security Leasing Services, Inc.

Signature of Debtor

Signature of Debtor

DOUBLE COMMUNICATIONS,

Form UCC-1 Form approved by Kansas Secretary of State

Signature of Secured Party (or assignee)

Signature of Secured Party (or assignee)