KATHY HILL
SKAGIT GOUNTY AUDITOR

T-79368-E

AMENDMENT TO DECLARATION OF COVENANTS, CONDITIONS, RESTRICTIONS, EASEMENTS AND ROAD MAINTENANCE AGREEMENT

96 JL 17 P3:29

LAND TITLE COMPANY OF SKAGIT COUNTY

9607170108

MECGROED____FILED___

WHEREAS, the undersigned are the owners of certain real property more particularly described in that certain Declaration of Covenants, Conditions, Restrictions, Easements and Road Maintenance Agreement dated September 21, 1989, and recorded under Skagit County Auditor's File No. 8909270044 (the "Covenants"), and

WHEREAS, it is the desire and intention of the owners whose signatures appear below to amend the covenant as provided in paragraph X thereof,

NOW THEREFORE, the undersigned, being 80% (or more) of the owners of lots subject to the Covenants, hereby declare the Covenants to be amended as follows.

- 1. Paragraph II(A) shall be stricken and the following substituted in its place:
- A. No lot shall be used except for residential purposes and/or for growth and harvest of forest crops. No buildings shall be erected, altered, place or permitted to remain on any lot other than a single family dwelling, a garage, accessory living quarters as defined by applicable Skagit County zoning ordinances, rules and regulations, a building for the housing and care of animals or fowl, and buildings for water pumping and storage facilities. No structure of a temporary character, trailer, mobile home, manufactured home, basement, tent, shack, garage, barn, or any other outbuilding shall be used on any lot at any time as a residence, either temporarily or permanently. Daycare and home occupation uses as defined by local zoning ordinances are strictly prohibited. Furthermore, group residences, homes utilized for full time supervision or housing resident persons, who by reason of their mental or physical disability, addiction to drugs or alcohol, or family and social adjustment problems, are strictly prohibited and are not considered residential uses.
 - 2. Paragraph II(O) shall be stricken and the following substituted in its place:
- O. Each dwelling shall be of permanent construction and shall not be less than 2,000 square feet in floor area, not including the garage. All garages must be a minimum of 400 square feet (two car) and not more than 800 square feet (four car). Stairs, walls, or siding on residences, garages, accessory living quarters, buildings for the housing and care of animals or fowl, and buildings for water pumping and storage facilities shall consist of materials other than:

1. Metal panelling;

2. Synthetic wood panelling, siding or plastic siding; or

3. Pre-fabricated plywood panelling.

- 3. This document may be executed in any number of counterparts all of which shall collectively be considered a single instrument and may be recorded as such.
- 4. Except as provided herein or as may otherwise be inconsistent herewith, all of the provisions of the Covenants are hereby ratified and reaffirmed.

		•	
DATEDALA	<u> </u>	•	
DATED this day of _	July	1996.	• •
QA AND		•	΄:
- Jaluan di Hal	loan	•	
PROPERTY OWNER (signature		PROPERTY OWNER (
Print Name: Patricia T	Hallaran	PROPERTY OWNER (si Print Name:	gnature)
	•		
		·	
D	· Control of the state of the s		
By		•	
, Title			
		-	
[Individual Attestation]		e e e e e e e e e e e e e e e e e e e	
STATE OF			
STATE OF		•	
COUNTY OF) SS.		
		•	
I certify that I know or have the person who appeared before	e satisfactory evid	ence that	•
the person who appeared before minstrument and acknowledged it	e, and said person	acknowledged that he/she si	med this
instrument and acknowledged it purpose mentioned in the instrument	to be his/her fre	e and voluntary act for the	uses and
Land mondouded in the mentione	EDI.		
Dated:			
	NOTA	RY PUBLIC in and for the	
	State of		
	Printed	Name	
, •	My con	nmission expires:	
[Corporate Attestation]		-	•
STATE OF			
COUNTY OF	SS.		
/	-		
I certify that I know or have	satisfactory evide	nce that	ئم مالم
person who appeared before me, instrument, on oath stated that he	and said person	acknowledged that he/she sig	is the
acknowledged it as the	A a was arrested	military in execute the military	ent and
corporation/limited liability compa	Of		
corporation/limited liability compasued corporation/limited liability compasued corporation/limited liability mentioned in the instrument.	ity company as	De his/her free and voluntar	ry act of
mentioned in the instrument.	y company/par	thersmy for the uses and	purpose
Dated:			
	37000		
	NOTAR	RY PUBLIC in and for the	
	State of Printed	Name	
•	My com	mission expires:	
1	-J		

	And the state of t	
State of California		
County of Santa Ba		
On July 10.1996	before me, _	Name and Title of Officer (e.g., "Jane Doe, Notary Public")
personally appeared Par	tricial I	Halloran Name(s) of Signer(s)
VANESSA MC C	RARY 6	on the basis of satisfactory evidence to be the person those name(s) is are subscribed to the within instrument acknowledged to me that he snethey executed the ame in his her their authorized capacity(ies), and that is her their authorized capacity(ies), and that is her their signature(s) on the instrument the person(s) rethe entity upon behalf of which the person(s) acted accuted the instrument.
Notary Public—C	County 🗐 🖔	/ITNESS my hand and official seal.
My Comm. Expires N	Mar 15, 2000	
	2	Drisia Macru 11
		Signature of Notary Public
Though the information below is not in fraudule. Description of Attached	required by law, it may pr ant removal and reattachr	TIONAL Tove valuable to persons relying on the document and could preverant of this form to another document.
Description of Attached Title or Type of Document:	required by law, it may proper to the proper	rove valuable to persons relying on the document and could preverse ment of this form to another document.
Description of Attached Title or Type of Document: Document Date:	required by law, it may pront removal and reattached Document Mendment 10,1996	rove valuable to persons relying on the document and could prevented this form to another document.
Description of Attached Title or Type of Document:	required by law, it may pront removal and reattached Document Mendment 10,1996	rove valuable to persons relying on the document and could prevented this form to another document.
Description of Attached Title or Type of Document: Act Document Date: The Signer(s) Other Than Named Act Capacity(ies) Claimed by	Pequired by law, it may proport removal and reattached procument Percentage of the procument of the procume	rove valuable to persons relying on the document and could prevenent of this form to another document.
Description of Attached Title or Type of Document: Document Date: Signer(s) Other Than Named A	Pequired by law, it may proport removal and reattached procument Percentage of the procument of the procume	rove valuable to persons relying on the document and could prevenent of this form to another document.
Description of Attached Title or Type of Document: Accomment Date: Document Date: Than Named Accomment of Capacity(ies) Claimed be Signer's Name: Patricial Individual	Pequired by law, it may proport removal and reattached procument Percentage of the procument of the procume	Number of Pages:
Description of Attached Title or Type of Document: Accomment Date: Document Date: Than Named Accommend of Capacity(ies) Claimed be Signer's Name: Patricia	Pequired by law, it may proport removal and reattached procument Percentage of the procument of the procume	rove valuable to persons relying on the document and could prevenent of this form to another document. LO Declaration Number of Pages:
Description of Attached Title or Type of Document: Accomment Date: Document Date: Signer(s) Other Than Named Accommend Date: Capacity(ies) Claimed be Signer's Name: Particion Corporate Officer Title(s): Partner— Limited Ge	Document Members Above: Halloa	Number of Pages:
Description of Attached Title or Type of Document: Accomment Date: Document Date: Signer(s) Other Than Named Accommend Date: Capacity(ies) Claimed box Signer's Name: Patricia Individual Corporate Officer Title(s): Partner— Limited Gee Attorney-in-Fact	Document Members Above: Halloa	Number of Pages:
Description of Attached Title or Type of Document: Accomment Date: Document Date: Signer(s) Other Than Named Accommend Date: Capacity(ies) Claimed both Signer's Name: Patricia Individual Corporate Officer Title(s): Partner— Limited Gee Attorney-in-Fact Trustee	Document Mendment Mendment Move: Signer(s) Parisonal	Number of Pages: Signer's Name: Individual Corporate Officer Title(s): Partner — Limited General Attorney-in-Fact Trustee
Description of Attached Title or Type of Document: Accomment Date: Document Date: Signer(s) Other Than Named Accommend Date: Capacity(ies) Claimed box Signer's Name: Patricia Individual Corporate Officer Title(s): Partner— Limited Gee Attorney-in-Fact	Document Document Members Above: Hallora Eneral	Number of Pages: Signer's Name: Individual Corporate Officer Title(s): Partner — Limited General Attorney-in-Fact Trustee
Description of Attached Title or Type of Document: Accomment Date: Document Date: Signer(s) Other Than Named Accommend Date: Capacity(ies) Claimed be Signer's Name: Patricial Individual Corporate Officer Title(s): Partner— Limited Ge Attorney-in-Fact Trustee Guardian or Conservator	Pequired by law, it may proport removal and reattached pocument Document Members Above: Y Signer(s) THALLOCA PRICHTHUMBERINT OF SIGNER	Number of Pages:
Description of Attached Title or Type of Document: Accomment Date: Document Date: Signer(s) Other Than Named Accomment Date: Capacity(ies) Claimed both Signer's Name: Particion Individual Corporate Officer Title(s): Partner— Limited Gee Attorney-in-Fact Trustee Guardian or Conservator Other:	Pequired by law, it may proport removal and reattached pocument Document Members Above: Y Signer(s) THALLOCA PRICHTHUMBERINT OF SIGNER	Number of Pages:
Description of Attached Title or Type of Document: Accomment Date: Document Date: Signer(s) Other Than Named Accommend Date: Capacity(ies) Claimed be Signer's Name: Patricial Individual Corporate Officer Title(s): Partner— Limited Ge Attorney-in-Fact Trustee Guardian or Conservator	Pequired by law, it may proport removal and reattached pocument Document Members Above: Y Signer(s) THALLOCA PRICHTHUMBERINT OF SIGNER	Number of Pages:

4 National Notary Association • 8235 Remmet Average Box 7184 Canoga Park, CA 91309-7184

Prod. No. 5907 Reorder: Call Toll-Free 1-800-876-6827

	• •		
DATED this 15th day of	July 19	96.	
	/)		
ines/ Mario	<u></u>		
PROPERTY OWNER (signature) Print Name: James A. Unica	L	PROPERTY OWNE Print Name:	ER (signature)
	and the state of t	^	•
	and the second s	•	
Ву		•	
, Title		•	•
[Individual Attestation]			
STATE OF Washington)			
	SS.	· <u>·</u>	•
COUNTY OF Whatcom		_	
I certify that I know or have	satisfactory evide	ence that James A.	Unrub is
ena marcam iirha armaaraa hatara mi	A ABA COIG NATEAN		
instrument and acknowledged it, purpose mentioned in the instrument	or he his ser he	e and voluntary act is	or the uses and
	ILLESION ELO DE	\cdot	•
Dated: 7-15-96	STARF	en Nee Cook	
	PUBLIC STATE	RY PUBLIC in and for	
	PUBL		bbins
	A SOL	nmission expires: 9-0	6-98
[Corporate Attestation]	Servences of the servence		
			•
STATE OF			•
COUNTY OF	SS.		
I certify that I know or have	satisfactory evide	ence that	is the is the this
person who appeared before me, instrument, on oath stated that h	, and said person le/she was autho	rized to execute the	nstrument and
a alam arrel a dagad ita aa aba	^ +	>	- 1 (A)
corporation/limited liability compasuch corporation/limited liabil	any/partnership, t	to be his/her free and	voluntary act of
mentioned in the instrument.	nty company/pa	itmeisuib for the use	s and purpose
mondoned in the librariona		•	
Dated:	NOTA	RY PUBLIC in and fo	- :ha
•	NOTA State o		r me:
	Printed	l Name	
	Му сел	nmission expires:	
	•		3*

9607170108 -2.

c:1/sgree/baggia

	~ ,
DATED this	<u>リン</u> , 1996.
_ Canto	
PROPERTY OWNER (signature)	PROPERTY OWNER (signature)
Print Name: CVAIS TUHE OC	Print Name:
	· .
Bv_	
, Title	
[Individual Attestation]	
STATE OF SAME OF STATE OF STATE OF STATE OF SAME OF SA	
COUNTY OF KIND SS.	
To all of the second	
I certify that I know or have satisfied person who appeared before me	sfactory evidence that AMI ////
instrument and acknowledged it to be	d said person acknowledged that he/she signed this his/her free and voluntary act for the uses and
purpose mentioned in the instrument.	and totalitary act for the uses and
Dated: Suly 11 1996	The state of the s
	NOTARY PUBLIC in and for the
	State of ///////////////////////////////////
· ·	Printed Name ARICE S. TIEICH
• •	My commission expires: 1-9-99
[Corporate Attestation]	
STATE OF	
SS	
COUNTY OF	
I certify that I know or have satis	factory exidence that
erson and appeared before me and	Said Derson acknowledged that be let
nstrument, on oath stated that he/sheacknowledged it as the	was authorized to execute the instrument and
ternomicaled if as the	of of a artnership, to be his/her free and voluntary act of
de corporation/limited manifely	ompany/partnership for the uses and purpose
nentioned in the instrument.	
Dated:	
	NOTARY PUBLIC in and for the
•	State of
-	Printed Name My compaission expires:
	My commission expires:

DATED this day of	<u>/, 1996.</u>
	9
_ C - T tallo []/	
PROPERTY OWNER (signature)	PROPERTY OWNER (signature)
Print Name: Craice Tirtle Or	Print Name:
By	
, Title	
[Individual Attestation]	
STATE OF MAGHINATON	
COUNTY OF SING	
I certify that / know on home	a tul
I certify that I know or have satisfact the person who appeared before me and satisfact	
instrument and acknowledged it to be his	d person acknowledged that he/she signed this s/her free and voluntary act for the uses and
purpose mentioned in the instrument.	dece for the uses and
Dated: 11 1996	- The State of the
	NOTARY PUBLIC in and for the
	State of USEFINATION
	Printed Name Jamics 5 Kelch My commission expires: 11-9-99
Corporate Attestation]	
•	
TATE OF)	
COUNTY OF \ ss.	
I certify that I know or have satisfacto	ory evidence thatis the
'	
cknowledged it as the	s authorized to execute the instrument and
orporation/limited liability company/partne	ership, to be his/her free and voluntary act of
entioned in the instrument.	or, a ership, to be his/her free and voluntary act of any/partnership for the uses and purpose
ated:	
	NOTARY PUBLIC in and for the State of
	Printed Name
•	My commission expires:
egree/bugggia	

-2-

	•
DATED this ill-day of July	, 1996.
and hid	
PROPERTY OWNER (signature)	PROPERTY OWNER (signature)
Print Name: Kand Bishop	Print Name:
	•
By, Title	
[Individual Attestation]	
STATE OF Washington)	
STATE OF	
COUNTY OF White town	
I certify that I know or have satisfac	tory evidence that Randall (Bishe signed this
instrument and acknowledged it to be iii	sher free and voluntary act for the uses and
purpose mentioned in the instrument.	
Dated: 7-10-96	NOTARY PUBLIC in and for the
-	State of Washireton
• • •	Printed Name JANICE MI LEOTUCH
•	My commission expires: 12-9 79
[Corporate Attestation]	
STATE OF	
COUNTY OF	
I certify that I know or have satisfac	ctory evidence that is the
nomen who appeared before the and sail	id nerson acknowledged that he/she signed this
instrument, on oath stated that he/she v	was authorized to execute the instrument and
acknowledged it as the	tnership, to be his/her free and voluntary act of
such corporation/ilmited ilability cor	npany/partnership for the uses and purpose
mentioned in the instrument.	
Dated:	
	NOTARY PUBLIC in and for the
	State ofPrinted Name
	My commission expires:

DATED this day of	, 1996.
~ 11 111	
Jam s m	tath mus
PROPERTY OWNER (signature) Print Name: Frank Imhof	PROPERTY OWNER (signature) Print Name: Dahl Im HOF
Fruit Name: Fronk John John	Print Name: Van I Im HOF
By	-
, Title	
[Individual Attestation]	
STATE OF Washington	
COUNTY OF Whatcom	
the persons who appeared before me, and said instrument and acknowledged it to be his purpose mentioned in the instrument.	i person acknowledged that he/she signed this there and voluntary act for the uses and
Dated: July 1, 1996	NOTARY PUBLIC in and for the State of Washington
	State of Washington Sources
•	Printed Name Masia K. Picker & DIA:
[Corporate Attestation]	10 UBL
STATE OF)	OF WASHING
COUNTY OF ss.	
COUNTION	
I certify that I know or have satisfacto	ory evidence that is the
instrument, on oath stated that he/she was acknowledged it as the	person acknowledged that he/she signed this s authorized to execute the instrument and
corporation/limited liability company/partnersuch corporation/limited liability comp	ership, to be his/her free and voluntary act of any/partnership for the uses and purpose
mentioned in the instrument.	
Dated:	
	NOTARY PUBLIC in and for the State of
•	Printed Name
- · · · · · · · · · · · · · · · · · · ·	My commission expires:

DATED this 27 day of June	, 1996.
CRa Helen	Et. Ray Ilda
PROPERTY OWNER (signature)	PROPERTY OWNER (signature)
Print Name: F. RAY HOLDEN	Print Name: Hollan, Holde
	Cap.fal Investment
	Trust.
By E. RAY Holden Trustee & Truster, Title	
Truster 4- Truster, Title	
[Individual Attestation]	
STATE OF Washington	
COUNTY OF West com	
I certify that I know or how satisfacto	ory evidence that <u>E. Ray Holden</u> is
the person who appeared refore me, and said	d person acknowledged that he/she signed this ther free and voluntary act for the uses and
instrument and acknowledged it ichechis	her free and voluntary act for the uses and
bridge mennoned instruction from S. A.	
Dated: 6.27.9	Teren & E. Williams
Dated.	NOTARY PUBLIC in and for the
77.100.17.100	
OF WASHING S	Printed Name Freign F. Williams
	My commission expires: 2-17-99
[Corporate Attestation]	
STATE OF)	
SS.	
COUNTY OF	
I certify that I know or have satisfactor person who appeared before me, and said instrument, on oath stated that he/she was acknowledged it as the	person acknowledged that he/she signed this authorized to execute the instrument and
corporation/limited liability company/partne	ership, to be his/her free and voluntary act of
such corporation/limited liability com	ership, to be his/her free and voluntary act of pany/partnership for the uses and purpose
mentioned in the instrument.	
· · · · · ·	
Dated:	NOTARY PUBLIC in and for the
	State of
	Printed Name
	My commission expires:

-2

O.4.	
DATED thisday of	, 1996.
Thand D. Sin	
PROPERTY OWNER (signature) Print Name:	PROPERTY OWNER (signature) Print Name:
By	
, Title	
[Individual Attestation]	
STATE OF Washington	
COUNTY OF Whatcom } ss.	
the person who appeared before me, and sai	ory evidence that <u>kichard</u> (F. <u>Sievers</u> is d person acknowledged that he/she signed this there and voluntary act for the uses and <u>Esse</u>
Dated: 7-9-96	Printed Name daven Dee Robbins Washington Printed Name daven Dee Robbins Washington Printed Name daven Dee Robbins Miscommission expires: 9-6-98
[Corporate Attestation]	* Second
STATE OF	
COUNTY OF Ss.	
I certify that I know or have satisfacted person who appeared before me, and said instrument, on oath stated that he/she was acknowledged it as the corporation/limited liability company/partn such corporation/limited liability company/mentioned in the instrument.	ory evidence that is the person acknowledged that he/she signed this as authorized to execute the instrument and of aership, to be his/her free and voluntary act of pany/partnership for the uses and purpose
Dated:	
	NOTARY PUBLIC in and for the State of Printed Name
	My commission expires:
⊂l/agree/buggia	3°

	-
DATED this 2 day of July, 19	96
PROPERTY OWNER (signature)	PROPERTY OWNER (signature)
PROPERTY OWNER (signature) Print Name:	Print Name:
	•
By	
, Title	
[Individual Attestation]	
STATE OF Washington	
COUNTY OF Libation } ss.	
I certify that I know or have satisfactory evide	nce that Kichard J. Kudy is
the person who appeared before me, and said person instrument and acknowledged it to be higher free	acknowledged that he/she signed this
purpose mentioned in the installed	common action the uses and
	$A_{co} P_{c} M_{c} = 0$
Dated: 7-8-96	RY PUBLIC in and for the
TO PENOTAL OF THE OFFICE OFFICE OFFICE OFFICE OFFICE OFFIC	(Washington
	Name Karen De Robbins
COLL SALMSTON TO COLL	mission expires: 9-6-98
[Corporate Attestation]	
STATE OF	
COUNTY OF Ss.	
COUNTIUF	
I certify that I know or have satisfactory evide	ence thatis the
person who appeared before me, and said person instrument, on oath stated that he/she was author	acknowledged that he/she signed this
acknowledged it as the of of corporation/limited liability company/partnership, to such corporation/limited liability company/pa	o be his/her free and voluntary act of
such corporation/limited liability company/pa	rtnership for the uses and purpose
mentioned in the instrument.	
Dated:	
	RY PUBLIC in and for the
State of	
Printed	Name
My con	nmission expires:
C1/agree/buggia	

	•
	· · · · · · · · · · · · · · · · · · ·
DATED this day of	
INLUA .	
	_ Suy hi Joseph
Print Name: Daja Gusture)	PROPERTY OWNER (signature)
11 me 1 vame. 12 kg (3/25 \ 2 \ 25 \ 2 \ 2 \ 2 \ 2 \ 2 \ 2 \ 2	Print Name KERRY W. JOSEP
By, Title	_
, nue	
[Individual Attestation]	· · · · · · · · · · · · · · · · · · ·
STATE OF Washington	
COUNTY OF Whatcom } ss. =	
	Kerry M. Joseph and
I certify that I know or have satisfac	tors residence that D. M. C. at C.
the person who appeared before me and	id person acknowledged that he/she signed this
Durnose mentioned in the incident	id person acknowledged that he/she signed this of the uses and
purpose mentioned in the instrumental	
instrument and acknowledged in the instrument and a	6 2 Cobour
213882	NO TARY PUBLIC in and for the
	NO SARY PUBLIC in and for the
	Minted Name Karen Dee Kokkins
MACCO MARCON	Sy commission expires: 9-6-98
[Corporate Attestation]	
STATE OF	
COUNTY OF SS.	
)	
I certify that I know or have satisfact	ory evidence that is the
person who appeared before me, and said	nerson acknowledged that he lake the
usu different, on takih stated that he/she w	as authorized to execute the instrument and
such corporation/limited liability company/partr	ership, to be his/her free and voluntary act of pany/partnership for the uses and purpose
nentioned in the instrument.	pany/partnership for the uses and purpose
Dated:	
•	NOTARY PUBLIC in and for the
•	State of Printed Name
	My commission expires:
· · · · · · · · · · · · · · · · · · ·	-v-, -vammosion cyhness.

DATED this day of	, 1996.
	n. Jane Parson
PROPERTY OWNER (signature) Print Name: O PARSNS	PROPERTY OWNER (signature) Print Name: No JANE PARS
By	••••••••••••••••••••••••••••••••••••••
, Title	
[Individual Attestation]	
STATE OF Washington)	
COUNTY OF Whatcom } ss.	N. Jane Parsons and
I certify that I know or have satisfact, the person who appeared before me and sai instrument and acknowledged is to be his purpose mentioned in the instrument.	ory evidence that T.D. Parsons is different acknowledged that he/she signed this they bee and voluntary act for the uses and
Dated: 7-9-96	Pertone Lobbe
BL OF STREET	CNOSIARY PUBLIC in and for the
On State of the St	Wy Commission expires: 9-6-98
[Corporate Attestation]	
STATE OF	
COUNTY OF ss.	
instrument, on oath stated that he/she was acknowledged it as the	d person acknowledged that he/she signed this as authorized to execute the instrument and of
such corporation/limited liability commentioned in the instrument.	pany/partnership for the uses and purpose
Dated:	NOTARY PUBLIC in and for the
· -	State ofPrinted Name
	My commission expires:
ert Jagree Negrola	

-2-

-	
DATED this 8 day of July	, 1996.
Paul City.	March 1 Min
PROPERTY OWNER (signature) Print Name: PAUL A. GIVEN	PROPERTY OWNER (signature) Print Name: Wendy Given
	Print Name: Wendy J. Given
By	
, Title	
[Individual Attestation]	
STATE OF Washington	
COUNTY OF Whatcom } ss.	
and become and appeared before the said (a)	ory evidence that wendy J. Given is id personsacknowledged that he/she signed this /her free and voluntary act for the uses and
Dated: July 8, 1996	NOTARY PUBLIC th and for the State of WOShinefor
	Printed Name Carole Kay Koddor
[Corporate Attestation]	My commission expires: 1-21-97
STATE OF)	
COUNTY OF ss.	
acknowledged it as the	person acknowledged that he/she signed this is authorized to execute the instrument and
Dated:	
	NOTARY PUBLIC in and for the State of
· · · · · · · · · · · · · · · · · · ·	Printed Name My commission emires:
	My commission expires:

, **- 2** -

PROPERTY OWNER (signature) Fint Name: 104		Ju/4, 1996.
Print Name: Shell Beson The Print Name: Shel	DATED this day of	2017, 1990.
Print Name: Shell Beson The Print Name: Shel	\	The lade
Print Name: Shell Beson The Print Name: Shel	Jon DNG	THEORY OVER (circover)
Individual Attestation] State of Washington I certify that I know or have satisfactory evidence that Sheila Ragis he person who appeared before me, and said person acknowledged that he/she signed instrument and acknowledged it to habis/her free and voluntary act for the uses purpose mentioned in the instrument of the State of Printed Name [Corporate Attestation] State of State of Printed Name State of Printed Name	ROPERTY OWNER (signature)	Property Control Suspending
Individual Attestation] STATE OF Washington I certify that I know or have satisfactory evidence that Sheila Baggia and the person who appeared before me, and said person acknowledged that he/she signed instrument and acknowledged it to be his/her free and voluntary act for the uses purpose mentioned in the instrument of the State of Printed Name [Corporate Attestation] STATE OF	rint Name: John Rugga	Print Name syretize design.
Individual Attestation] STATE OF Washington I certify that I know or have satisfactory evidence that Sheila Baggia and the person who appeared before me, and said person acknowledged that he/she signed instrument and acknowledged it to be his/her free and voluntary act for the uses purpose mentioned in the instrument of the State of Printed Name [Corporate Attestation] STATE OF		
Individual Attestation] STATE OF Washington I certify that I know or have satisfactory evidence that Sheila Baggia and the person who appeared before me, and said person acknowledged that he/she signed instrument and acknowledged it to be his/her free and voluntary act for the uses purpose mentioned in the instrument of the State of Printed Name [Corporate Attestation] STATE OF		
Individual Attestation] STATE OF Washington I certify that I know or have satisfactory evidence that Sheila Baggia and the person who appeared before me, and said person acknowledged that he/she signed instrument and acknowledged it to be his/her free and voluntary act for the uses purpose mentioned in the instrument of the State of Printed Name [Corporate Attestation] STATE OF		
Individual Attestation STATE OF Washington I certify that I know or have satisfactory evidence that Sheila Baggia and the person who appeared before me, and said person acknowledged that he/she signed instrument and acknowledged it to he his/her free and voluntary act for the uses purpose mentioned in the instrument EE Dated: 7-8-96 OTAM STATE OF State Name Reven De Robbins [Corporate Attestation] STATE OF Ss. I certify that I know or have satisfactory evidence that person who appeared before me, and said person acknowledged that he/she signed instrument, on oath stated that he/she was authorized to execute the instrument acknowledged it as the of corporation/limited liability company/partnership, to be his/her free and voluntary as such corporation/limited liability company/partnership for the uses and pur mentioned in the instrument. Dated: NOTARY PUBLIC in and for the State of Printed Name	y	
I certify that I know or have satisfactory evidence that Shella Baggia and the person who appeared before me, and said person acknowledged that he/she signed instrument and acknowledged it to be his/her free and voluntary act for the uses purpose mentioned in the instrument EE Dated: 7-8-96 [Corporate Attestation] STATE OF I certify that I know or have satisfactory evidence that person who appeared before me, and said person acknowledged that he/she signed instrument, on oath stated that he/she was authorized to execute the instrument acknowledged it as the of corporation/limited liability company/partnership, to be his/her free and voluntary as such corporation/limited liability company/partnership for the uses and pur mentioned in the instrument. NOTARY PUBLIC in and for the State of Printed Name	, line	
I certify that I know or have satisfactory evidence that Shella Baggia and the person who appeared before me, and said person acknowledged that he/she signed instrument and acknowledged it to be his/her free and voluntary act for the uses purpose mentioned in the instrument EE Dated: 7-8-96 [Corporate Attestation] STATE OF I certify that I know or have satisfactory evidence that person who appeared before me, and said person acknowledged that he/she signed instrument, on oath stated that he/she was authorized to execute the instrument acknowledged it as the of corporation/limited liability company/partnership, to be his/her free and voluntary as such corporation/limited liability company/partnership for the uses and pur mentioned in the instrument. NOTARY PUBLIC in and for the State of Printed Name		
I certify that I know or have satisfactory evidence that Shella Baggia and the person who appeared before me, and said person acknowledged that he/she signed instrument and acknowledged it to be his/her free and voluntary act for the uses purpose mentioned in the instrument EE Dated: 7-8-96 [Corporate Attestation] STATE OF I certify that I know or have satisfactory evidence that person who appeared before me, and said person acknowledged that he/she signed instrument, on oath stated that he/she was authorized to execute the instrument acknowledged it as the of corporation/limited liability company/partnership, to be his/her free and voluntary as such corporation/limited liability company/partnership for the uses and pur mentioned in the instrument. NOTARY PUBLIC in and for the State of Printed Name	Individual Attestation]	
I certify that I know or have satisfactory evidence that		
I certify that I know or have satisfactory evidence that Sheila Baggia the person who appeared before me, and said person acknowledged that he/she signed instrument and acknowledged it to be his/her free and voluntary act for the uses our pose mentioned in the instrument of the state of the signed instrument, on oath stated that he/she was authorized to execute the instrument acknowledged it as the corporation/limited liability company/partnership, to be his/her free and voluntary a such corporation/limited liability company/partnership for the uses and pur mentioned in the instrument. NOTARY PUBLIC in and for the State of Printed Name	TATE OF Washington (
I certify that I know or have satisfactory evidence that Shelle Engages the person who appeared before me, and said person acknowledged that he/she signed instrument and acknowledged it to be his/her free and voluntary act for the uses our pose mentioned in the instrument of EE County Prace Name Name Name Name Name Name Name Nam	moskadu an vertice	55.
Tecrnity that I know or have satisfactory evidence that County OF		Tom Buggia and
Icertify that I know or have satisfactory evidence that person who appeared before me, and said person acknowledged that he/she signed instrument, on oath stated that he/she was authorized to execute the instrument acknowledged it as the corporation/limited liability company/partnership, to be his/her free and voluntary as state of Printed Name NOTARY PUBLIC in and for the State of Printed Name NOTARY PUBLIC in and for the State of Printed Name	I certify that I know or have	satisfactory evidence that
Dated: 7-8-96 Dated: 7-8-96 Corporate Attestation I certify that I know or have satisfactory evidence that person who appeared before me, and said person acknowledged that he/she signed instrument, on oath stated that he/she was authorized to execute the instrument acknowledged it as the of acknowledged it as the of acknowledged it as the corporation/limited liability company/partnership, to be his/her free and voluntary a such corporation/limited liability company/partnership for the uses and pur mentioned in the instrument. NOTARY PUBLIC in and for the State of Printed Name		
Corporate Attestation STATE OF Ss. COUNTY OF Ss. I certify that I know or have satisfactory evidence that in the person who appeared before me, and said person acknowledged that he/she signed instrument, on oath stated that he/she was authorized to execute the instrument acknowledged it as the of	neimiment and acknowledged it i	
[Corporate Attestation] STATE OF	ourpose mentioned in the instrume	TOPE ROSS
[Corporate Attestation] STATE OF	Dotad: 7-8-96	is esion en estate. Del Koton
[Corporate Attestation] STATE OF	Daleu	ATA BEEN SECTION OF THE SECTION AND FOR THE
[Corporate Attestation] STATE OF		SAMMAN AND THE MENT OF THE
[Corporate Attestation] STATE OF		
STATE OF		Stated Coospington
STATE OF		Stated Coospington
I certify that I know or have satisfactory evidence thati person who appeared before me, and said person acknowledged that he/she signed instrument, on oath stated that he/she was authorized to execute the instrument acknowledged it as the of, a	Company Attestation	Stated Coospington
I certify that I know or have satisfactory evidence thati person who appeared before me, and said person acknowledged that he/she signed instrument, on oath stated that he/she was authorized to execute the instrument acknowledged it as the of, a	[Corporate Attestation]	Stated Coospington
I certify that I know or have satisfactory evidence thatin person who appeared before me, and said person acknowledged that he/she signed instrument, on oath stated that he/she was authorized to execute the instrument acknowledged it as the of		Stated Coospington
I certify that I know or have satisfactory evidence that person who appeared before me, and said person acknowledged that he/she signed instrument, on oath stated that he/she was authorized to execute the instrument acknowledged it as the of, a corporation/limited liability company/partnership, to be his/her free and voluntary a such corporation/limited liability company/partnership for the uses and pur mentioned in the instrument. Dated:	STATE OF	Post Stator Washing Teren Dee Hobbins Post Masking Teren Dee
person who appeared before me, and said person acknowledged that he instrument, on oath stated that he she was authorized to execute the instrument acknowledged it as the of, a corporation/limited liability company/partnership, to be his/her free and voluntary a such corporation/limited liability company/partnership for the uses and pur mentioned in the instrument. Dated: NOTARY PUBLIC in and for the State of Printed Name	STATE OF	Post Stator Washing Teren Dee Hobbins Post Masking Teren Dee
acknowledged it as the of a corporation/limited liability company/partnership, to be his/her free and voluntary a such corporation/limited liability company/partnership for the uses and pur mentioned in the instrument. Dated: NOTARY PUBLIC in and for the State of Printed Name	STATE OF	Pinted Name Reven Dee Robbins
acknowledged it as the	COUNTY OF	State of Name Physical Name 16-90 Maccommission expires: 9-6-98 Ss. e satisfactory evidence that 10-90
Dated: NOTARY PUBLIC in and for the State of Printed Name	COUNTY OF	Printed Name Name Name Name No. 100 March No. 100 Marc
Dated: NOTARY PUBLIC in and for the State of Printed Name	COUNTY OF	Printed Name Name Name Name No. 100 March No. 100 Marc
Dated: NOTARY PUBLIC in and for the State of Printed Name	COUNTY OF	Printed Name Name Name Name No. 100 March No. 100 Marc
NOTARY PUBLIC III and for the State of	COUNTY OF	Printed Name Name Name Name No. 100 March No. 100 Marc
NOTARY PUBLIC III and for the State of	COUNTY OF	Printed Name Name Name Name No. 100 March No. 100 Marc
State of	COUNTY OF	Printed Name Name Name Name No. 100 March No. 100 Marc
Printed Name	COUNTY OF	Printed Name States Name Printed Name Second Dec Robbins Second Seco
My commission expires:	COUNTY OF	State of Printed Name Reserved De 2 Robbins 9-6-98 10 Washing and said person acknowledged that he/she signed the signed the said person acknowledged the instrument of any/partnership, to be his/her free and voluntary a slity company/partnership for the uses and pur NOTARY PUBLIC in and for the State of
	COUNTY OF	State of

- 2 -

\ DATED this 9th day of July	, 1996
1 de la	Mill soulle
PROPERTY OWNER (signature)	PROPERTY OWNER (signature)
Print Name:	Print Name:
	•
By	
, Title	
[Individual Attestation]	
STATE OF Washington	• • • • • • • • • • • • • • • • • • •
STATE OF	
COUNTY OF CONSCOR	
Toomise About Times and beautiful	tory evidence that Dan Cantrell and is
the person who appeared before me, and sa	aid person acknowledged that he/she signed this
instrument and acknowledged it to be hi	ther free and voluntary act for the uses and
purpose mentioned in the instrument. DE	
Dated: 7-9-96	a la cobben
Dated.	PARY PUBLIC in and for the
	- Sition Washington
	Printed Name Karen Dee Robbins Wassimmission expires: 9-6.98
	and striumssion expires:
[Corporate Attestation]	
STATE OF	
COUNTY OF	
I certify that I know or have satisfactors who appeared before me, and sai	tory evidence that is the id person acknowledged that he/she signed this
instrument, on oath stated that he/she v	vas authorized to execute the instrument and
acknowledged it as the	
corporation/limited liability company/para	nership, to be his/her free and voluntary act of apany/partnership for the uses and purpose
such corporation/ilmited liability con	apany/partnership for the uses and purpose
Dated:	TOTAL DEVINE TO TOTAL TO THE TOTAL TOTAL TOTAL TOTAL TOTAL TO THE TOTAL
	NOTARY PUBLIC in and for the State of
	Printed Name
	My commission expires:
	· · · · · · · · · · · · · · · · · · ·

-2-

DATED this Att day of Qune	<u></u>
	Bright Miller
PROPERTY OWNER (signature)	PROPERTY OWNER (signature)
Print Name:	Print Name: TARA (Signature)
	- HAMA THE PULSU
	- (
	•
By	
, Title	
[Individual Attestation]	
STATE OF VIRGINIA	
CITY SS.	
COUNTY OF ALEXANDEIA SS.	
	0000111 10-1-
the person who appeared before me and co-	ory evidence that BARLY M. MEUSE is id person acknowledged that he/she signed this
modument and acknowledged it to be his	her free and voluntary act for the uses and
purpose mentioned in the instrument.	, and tolding act to the ases and,
Dated: June 24, 1996	Panal Winger
Dated. Gogie Military	NOTARY PUBLIC in and for the
	State of VIRGINIA
	Printed Name Pewal I. Simonia
•	My commission expires: 8-31-99
[Corporate Attestation]	
STATE OF	
STATE OF	
COUNTY OF	
T	
I certify that I know or have satisfacto	ory evidence that is the
instrument, on oath stated that he/she wa	person acknowledged that he/she signed this authorized to execute the instrument and
acanomicuscu il as me	
corporation/limited liability company/partners	ership, to be his/her free and voluntary act of
mentioned in the instrument.	ciship, to be his/her free and voluntary act of cany/partnership for the uses and purpose
Dated:	
	NOTARY PUBLIC in and for the
	State of Printed Name
	My commission expires:

DATED thisda	y of	. 1006	•
		1996.	
Genela Still		·-	•
PROPERTY OWNER (sig	nature)	PROPERTY OUNTED C:	<u> </u>
Print Name: Claude	Cliver	PROPERTY OWNER (signa Print Name:	mre)
		·	
By		•	
	, Title		_
	· 1		-
[Individual Attestation]			
-	- -		
STATE OF Washingto			
COUNTY OF Whatco-			
Toertify that I know	or house estate	Claude B Olive	
the person who appeared be	fore me, and ca	tory evidence that Claude B. Oliver aid person acknowledged that he/she signed	3
THE THE STATE OF SECULOMIES	zeu II IO ne mi	s/her free and voluntary act for the use	es end
purpose mendoned in the in	Strument	Constant of the second	
Dated: 7-1-96	Aller City	Janen Die Kroben	
	TAR OTAR	RY PUBLIC in and for the	
	3212	Printed Name Karen Dec Robbin	
	E of Dabi	My commission expires: 9-6-98	<u> </u>
[Corporate Attestation]	A 47 8.8.9		
•	Salar Con Mark		
STATE OF			
COUNTY OF	SS.		
Y	•		
I certify that I know operson who appeared before	or have satisfact	ory evidence that	is the
man difference on oadii stateti	that he/she wa	person acknowledged that he/she signe as authorized to execute the instrument	d this
Such corporation/limited	company/partn	nership, to be his/her free and voluntary a pany/partnership for the uses and pur	act of
mentioned in the instrument	·	harry har mersurb for the fises and bin	Pose
Dated:	•		
		NOTARY PUBLIC in and for the	
•	•	State of	
•	_	Printed Name	/
·	-	My commission expires:	
-1 Joseph Bernele		-	

DATED this 28th day oflune	, 1996.
Cary Elleson	
PROPERTY OWNER (signature) Print Name: Carp Flisco	PROPERTY OWNER (signature) Print Name:
Ellison Brady Inv. :	
By Cary Ellison General Partner, Title	
[Individual Attestation]	
STATE OF Washington	
COUNTY OF Whatcom } ss.	
the person who appeared before me, and said	ery evidence that <u>CAPUEIIISD</u> is a person acknowledged that he/she signed this ther free and voluntary act for the uses and
Dated: 6/28/96	Dale & Clus
	NOTARY PUBLIC in and for the State of Washing for
· .	Printed Name Darla D. Cana and A. C.
	My commission expires: 10/15/199
[Corporate Attestation]	
STATE OF)	
COUNTY OF	
	Constant of the contract of th
I certify that I know or have satisfacto person who appeared before me, and said	person acknowledged that he she signed this
instrument, on oath stated that he/she was acknowledged it as the	s authorized to execute the instrument and
corporation/limited liability company/partne	ership, to be his/her free and voluntary act of any/partnership for the uses and purpose
mentioned in the instrument.	any/partnersnip for the uses and purpose
Dated:	
	NOTARY PUBLIC in and for the State of
	Printed Name
-	My commission expires:

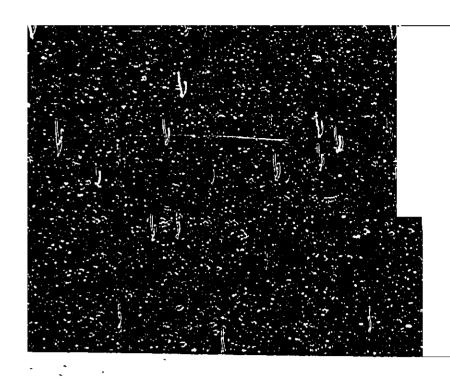
BK 1568PG0160

ci/agree/suggio

	• -
DATED this aday of July	, 1 996.
Viru (antie)	· · · · · · · · · · · · · · · · · · ·
PROPERTY OWNER (signature) Print Name: (24 24 24 24 25 24 25 24 25 25	PROPERTY OWNER (signature) Print Name:
	•
By, Title	
[Individual Attestation]	· · · · · · · · · · · · · · · · · · ·
STATE OF Washington)	
COUNTY OF Whatcom } ss.	
Dated: 7-8-96	person acknowledged that he/she signed this fer free and voluntary act for the uses and solve for the state of washington frinted Name karen Dee Robbins My commission expires:
[Corporate Attestation]	
STATE OF	
COUNTY OF ss.	
instrument, on oath stated that he/she was acknowledged it as the	person acknowledged that he/she signed this as authorized to execute the instrument and of
Dated:	
	NOTARY PUBLIC in and for the State of
	Printed Name
· · · · · · · · · · · · · · · · · · ·	<u> </u>

=1/agree/baggie

DATED this day of	, 1996.
Att Moethers	
PROPERTY OWNER (signature) Print Name: /// // / / / / / // / / / / / / / / /	PROPERTY OWNER (signature) Print Name:
By	
, Title-	CARISA HELM NOTARY PUBLIC
[Individual Attestation]	STATE OF WASHINGTON MY COMMISSION EXPIRES MARCH 23, 1999
STATE OF Liashington	
COUNTY OF Linestan) SS.	
I certify that I know or have satisfacted the person who appeared before me, and sai instrument and acknowledged it to be his purpose mentioned in the instrument. Dated: 10-28-90	ory evidence that Mirly Mathemasis d person acknowledged that he/she signed this /her free and voluntary act for the uses and NOTARY PUBLIC in and for the State of Line Mirror Mirror Printed Name Mirror Mirror My commission expires: 3-23-99
[Corporate Attestation]	
STATE OF)	
COUNTY OF ss.	
acknowledged it as the	ory evidence that is the person acknowledged that he/she signed this is authorized to execute the instrument and of, a ership, to be his/her free and voluntary act of pany/partnership for the uses and purpose
Dated:	
	NOTARY PUBLIC in and for the State of
	Printed Name My commission expires:



DATED this 25 day of June	<u> </u>
(mlip & Mo_	71: : 114
PROPERTY OWNER (signature) Print Name: PHILIP 3. WU	PROPERTY OWNER (signature) Print Name: VIRGINIA S. WU
By	
, Title	
[Individual Attestation]	
STATE OF + Hawaii	
COUNTY OF ss.	
the person who appeared before me, and	said person acknowledged that he/she signed this his/her free and voluntary act for the uses and NOTARY PUBLIC in and for the State of Halling Printed Name Genalding Lyoshida My commission expires:
[Corporate Attestation]	
STATE OF)	
COUNTY OF ss.	
acknowledged it as the	is the sid person acknowledged that he/she signed this was authorized to execute the instrument and of
Dated:	
	NOTARY PUBLIC in and for the State of
	Printed Name
m1 Jacons Bassala	

DATED this day of 27	
Mh A MAB	
PROPERTY OWNER (signature)	PROPERTY OWNER (signature)
Print Name: 2005/25 (5)	Print Name:
	•
	•
By	•
, Title	
[Individual Attestation]	
STATE OF Washington	• • • • • • • • • • • • • • • • • • •
COUNTY OF What com } ss.	
I certify that I know or have satisfact	ory evidence that Douglas G. Hilly is
the person who appeared before me, and sai	id person acknowledged that he/she signed this /her free and voluntary act for the uses and
Dated: 6-27-96 strong Parison	
Dated: 47-96	Ronandee Kohben
S NOTAGE	OTARY PUBLIC in and for the
	Printed Name Karen Dee Robbin
	My commission expires: 9-6-98
[Corporate Attestation]	

STATE OF	
COUNTY OF	
)	
I certify that I know or have satisfacte	ory evidence that is the
person who appeared before me, and said	person acknowledged that he/she signed this authorized to execute the instrument and
acknowledged it as the	is authorized to execute the instrument and
corporation/limited liability company/partn	ership, to be his/her free and voluntary act of
such corporation/limited liability comp	ership, to be his/her free and voluntary act of pany/partnership for the uses and purpose
mentioned in the instrument.	
Dated:	
	NOTARY PUBLIC in and for the
	State of
	Printed Name My commission emires:
· · · · · · · · · · · · · · · · · · ·	My commission expires:
or leave house	· · · · · · · · · · · · · · · · · · ·

DATED this a Tone	, 1996.
	, 1990.
John Lawre Forthol	
PROPERTY OWNER (signature)	PROPERTY OWNER (signature)
Print Name: JOHN LARRY BARTHO	Print Name:
	•
	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
By	
, Title	
[Individual Attestation]	
STATE OF California) ss.	
COUNTY OF Contractal	
I certify that I know or have satisfact	ory evidence that John Larry Buthold is
me person who appeared before me, and sai	d person acknowledged that (E) che signed this
made and acknowledged if to be us	her free and voluntary act for the uses and
purpose mentioned in the instrument.	
Dated: June 27 1994	Tinda Hopanovah
	NOTARY PUBLIC in and for the
UNDA STEPANOVICH	State of Cal Joine
COMM. # 1020988 Notary Public — California	Printed Name ININA STEPANONICH
CONTRA COSTA COUNTY	My commission expires: March 20 1998
[Corporate Attestation]	
[Our por actor of recognition]	
STATE OF	
) ss.	
COUNTY OF	
Togetify that I Imam as home said	
I-certify that I know or have satisfacto	ory evidence that is the
instrument. On oath stated that he/she was	person acknowledged that he/she signed this is authorized to execute the instrument and
achiowical il an ille	
corporation/limited liability company/partne	ership, to be his/her free and voluntary act of
such corporation/limited liability comp mentioned in the instrument.	ership, to be his/her free and voluntary act of cany/partnership for the uses and purpose
Dated:	
	NOTARY PUBLIC in and for the
	State of
•	Printed Name
•	My commission expires:

DATED this Olday of	1996.
PROPERTY OWNER (signature) Print Name: DAVID L CAN PROPU	PROPERTY OWNER (signature)
Print Name: DAVID L CAVANAU	Print Name:
	_
By	
, Title	
[Individual Attestation]	
STATE OF WASHINGTON	
COUNTY OF <u>Sno Hernish</u> ss.	
•	
I certify that I know or have satisfac	tory evidence that David Country is
me person who appeared before me, and sa	lid herson acknowledged that he lebe simble this
purpose mentioned in the instrument.	s/her free and voluntary act for the uses and
Dated: U O I I I I I I I I I I I I I I I I I I	Majin March State of Washington Printed Name Maxing March
Right Hispan Etal	State of 11/01/01/07
S NOTARY &	Printed Name Maxine March
EO PUBLIC	My commission expires: 11 198
[Corporate Attestation]	
OF WICH	
777711111111111111111111111111111111111	
COUNTY OF SS.	
I certify that I know or have satisfact	tory evidence that is the
instrument, on oath stated that he /che me	d person acknowledged that he/she signed this as authorized to execute the instrument and
acknowledged it as the	as authorized to execute the instrument and
corporation /limited liability company/port	nership, to be his/her free and voluntary act of
such corporation/limited liability commentioned in the instrument.	pany/partnership for the uses and purpose
mendoned in the ablument.	
Dated:	
	NOTARY PUBLIC in and for the
	State of
·	Printed Name My commission expires:

-2-

DATED this 26 day of UNE	=, 1996.
Multibner	- () () () () () () () () () (
PROPERTY OWNER (signature) Print Name: UOHN HUENER	PROPERTY OWNER (signature)
Print Name: UOHN HUENER	PROPERTY OWNER (signature) Print Name: 1/121E A. HUBNER
By	
, Title	
[Individual Attestation]	
STATE OF WASHINGTON	
COUNTY OF SKAGIT SS.	
the person who appeared before me, and sai	ory evidence that ful about Signed if are dependence that ful about Signed if are dependence that her she signed this fiber free and voluntary act for the uses and her
Dated: 6.26.96	Chan Willia
•	NOTARY PUBLIC in and for the
	State of WASHINGTON . Printed Name TANUILUS
	My commission expires: 10, 1.98
[Corporate Attestation]	
STATE OF	
COUNTY OF	
I certify that I know or have satisfacto	ory evidence that
person who appeared before me, and said	nerson acknowledged that
instrument, on oath stated that he/she wa acknowledged it as the	s authorized to execute the
corporation /limited liability compony/porter	ership, to be his/her free and voluntary act of
such corporation/limited liability comp mentioned in the instrument.	pany/partnership for the uses and purpose
Dated:	
- 	NOTARY PUBLIC in and for the State of
	Printed Name
= .	My commission expires:

	·
DATED this 3 day of TA	· · · · · · · · · · · · · · · · · · ·
	<u>27, 1996.</u>
Liebard S. Loderell_	· · · · · · · · · · · · · · · · · · ·
PROPERTY OWNER (signature)	PROPERTY OWNER (
Print Name: RICHARY S. BOCK	PROPERTY OWNER (signature) Print Name:
By	
, Title	
[Individual Attestation]	
STATE OF Washington	
COUNTY OF Wheteun ss.	
I certify that I know an house at a	
my building with annexien heighe ma and a	ctory evidence that Richard Rockwell is
	aid person acknowledged that he/she signed this is/her free and voluntary act for the uses and
	act tot the uses and
Dated: Unly 3 1996	Moder Hand
	NOTARY PUBLIC in and for the
	State of Washington
	Printed Name Gegali Grand.
	My commission expires: 9. 20.91
Corporate Attestation]	
STATE OF	
· · · · · · · · · · · · · · · · · · ·	ROIARPA
COUNTY OF	PURIC !s
T	17 / 1,9 · 20 · C3
I certify that I know or have satisfac	tory evidence that to the
VASUU WHO ADDUCATED HEINTE THE STA CAL	
cknowledged it as the	as authorized to execute the instrument and
Opporation /limited liability company	_ OI, a,
uch corporation/limited liability com nentioned in the instrument.	nership, to be his/her free and voluntary act of ipany/partnership for the uses and purpose
Dated:	
	NOTARY PUBLIC in and for the
	State of Printed Name
- · · · · · · · · · · · · · · · · · · ·	My commission expires

DATED this day of July	, 1996. \nearrow
Steph 1 mm	
PROPERTY OWNER (signature)	- limely T. Standhen
Print Name: STEPHEN J GRANAHA	PROPERTY OWNER (signature)
	W Print Name: Tames in L. GRANALIA
	-
	•
By	
Title	
[Individual Attestation]	
STATE OF Washington.	
COUNTY OF Whatcom } ss.	
	Stephen J. Granaban &
I certify that I know or have satisfact	Stephen J. Granahan & ory evidence that Pamela K. Granahan is
the person who appeared before me, and sai	d nerson acknowledged that he /she signed this
THE CHICAL STIC SCRIUMICUSCU II THE CONTROL	ther free and voluntary act for the uses and
purpose mentioned in the instrument EE	
Dated: 7-8-96	
STS ACTAP.	CINRY PUBLIC in and for the
	Sacrof Washington
A STANCE	Fringed Name Karen Dee Robbins
₹ \$ -6-90	y commission expires: 9-6-98
[Corporate Attestation]	
Constitution of the consti	
STATE OF	
ss.	
COUNTY OF	
I cartify that I know as home satisfy	
I certify that I know or have satisfactor	ory evidence that is the
instrument, on oath stated that he/she wa	person acknowledged that he/she signed this authorized to execute the instrument and
acknowledged it as the	of
corporation/limited liability company/partne	ership, to be his/her free and voluntary act of
such corporation/limited liability comp	ership, to be his/her free and voluntary act of pany/partnership for the uses and purpose
mentioned in the instrument.	
Dated:	
	NOTARY PUBLIC in and for the
•	State of
• • • • • • • • • • • • • • • • • • •	Printed Name
	My commission expires:
c1/agree/buggie	