



200701160208

Skagit County Auditor

1/16/2007 Page

1 of

2 4:24PM

AFTER RECORDING RETURN TO:

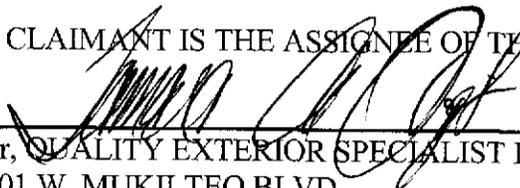
LIEN RESEARCH CORP.
P. O. BOX 148
MARYSVILLE, WA 98270

CLAIM OF LIEN

QUALITY EXTERIOR SPECIALIST LLC
Claimant.
VS
B.C. CYPRESS CONSTRUCTION, INC
(Name of person indebted to claimant)

NOTICE IS HEREBY GIVEN that the person below claims a lien pursuant to chapter 60.04 RCW. In support of this lien the following information is submitted:

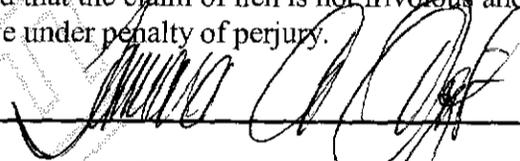
1. NAME OF LIEN CLAIMANT: QUALITY EXTERIOR SPECIALIST LLC
TELEPHONE NUMBER: (425) 268-8172
ADDRESS: 2601 W. MUKILTEO BLVD, EVERETT, WA. 98203
2. DATE ON WHICH THE CLAIMANT BEGAN TO PERFORM LABOR, PROVIDE PROFESSIONAL SERVICES, SUPPLY MATERIAL OR EQUIPMENT OR THE DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS BECAME DUE: OCTOBER 26, 2006
3. NAME OF PERSON INDEBTED TO THE CLAIMANT: B.C. CYPRESS CONSTRUCTION, INC, 826 METCALF ST, #236, SEDRO WOOLLEY, WA. 98284
4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED:
ADDRESS: 740 OVERLOOK DR (LANE), BURLINGTON, WA.
LEGAL DESCRIPTION: LOT 80, TINAS COMA, RECORDS OF SKAGIT COUNTY, STATE OF WASHINGTON.
SKAGIT COUNTY ASSESSOR'S TAX PARCEL NO. P117115
5. NAME OF OWNER OR REPUTED OWNER (if not known state "unknown"):
B.C. CYPRESS CONSTRUCTION, INC, 826 METCALF ST, #236, SEDRO WOOLLEY, WA. 98284
6. THE LAST DATE ON WHICH LABOR WAS PERFORMED; PROFESSIONAL SERVICES WERE FURNISHED; CONTRIBUTIONS TO AN EMPLOYEE BENEFIT PLAN WERE DUE OR MATERIAL, OR EQUIPMENT WAS FURNISHED: NOVEMBER 20, 2006
7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED: \$9,975.01 PLUS APPLICABLE LIEN FEES &/OR ATTORNEY'S FEES, &/OR INTEREST.
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: N/A.



 For, QUALITY EXTERIOR SPECIALIST LLC, Claimant
 2601 W. MUKILTEO BLVD
 EVERETT, WA. 98203
 (425) 268-8172
 (Phone Number, Address, City/State of Claimant)

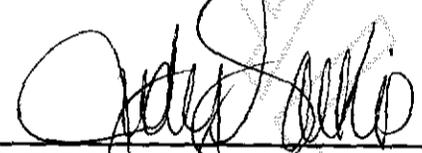
STATE OF WASHINGTON)
) ss
COUNTY OF SNOHOMISH)

TAMARA A OQUIST, being sworn, says: I am the agent of the claimant (or attorney of the claimant, or administrator, representative, or agent for the trustee of an employee benefit plan) above named. I have read the foregoing claim, know the contents thereof, and believe the same to be true and correct and that the claim of lien is not frivolous and is made with reasonable cause, and is not clearly excessive under penalty of perjury.

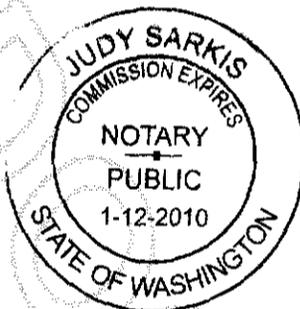


On this day personally appeared before me, TAMARA A OQUIST, to me known to be the individual, described above, and who further, under oath, stated that he/she had read the claim set forth above, and based upon information provided knew the contents thereof, and believed the same to be true and correct, and that the claim was made with reasonable cause and was not frivolous, and further acknowledged to me that he/she signed the same as his/her free and voluntary act and deed for the uses and purposes therein mentioned.

Subscribed and sworn to before me this 9 day of January, 2007



PRINTED NAME: JUDY SARKIS
NOTARY PUBLIC
in and for the State of Washington.
Residing in: STANWOOD
My commission expires: 1/12/2010



Order #07-010555, dated: 1/5/2007


200701160208
Skagit County Auditor
1/16/2007 Page 2 of 2 4:24PM