After Recording Return to:

Anacortes Interiors Flooring Connections, LLC 902 Commercial Ave Anacortes, WA 98221



12/7/2007 Page

210:03AM

## CLAIM OF LIEN

Grantor (Owner of property

whose property is being liened):

Lake View Heights, LLC

Grantee (Name of lien claimant): Anacortes Interiors Flooring Connections, LLC

Abbreviated Legal Description

(e.g. "Lot 1, Block 2,...):

Lakeview Heights, Lot 3, Acres 1.00, AF#200604120075,

Being a Portion of the SW 1/4 of Section 31, Township 34

North, Range 4 East

Assessor's Property Tax

Parcel/Account No.:

P124317 4888-000-003-0000

Notice is hereby given that the person named below claims a Lien pursuant to RCW Ch. 60.04. In support of the Lien, the following information is submitted.

Name of Lien Claimant: 1.

Anacortes Interiors Flooring Connections, LLC

Address:

902 Commercial Ave

Anacortes, WA 98221

Telephone Number:

(360) 293-6000

Date on which the claimant began to perform labor, provide professional 2. services, supply material or equipment or the date on which employee benefit contributions became due:

June 17th, 2007

Name of person or contractor indebted to claimant: 3.

Lake View Heights, LLC

Description of the property against which a Lien is claimed (street address, legal description or other information that will reasonably describe the property): 24068 Priscilla Lane, Mount Vernon, WA 98274 Lakeview Heights, Lot 3, Acres 1.00, AF#200604120075, Being a Portion of the SW 1/4 of Section 31, Township 34 North, Range 4 East Name of the owner or reputed owner (if not known state "unknown"): 5. Lake View Heights, LLC The last date on which labor was performed; professional services were 6. furnished; contributions to an employee benefit plan were due; or material, or equipment was furnished: October 31, 2007 Principal amount for which the Lien is claimed is: \$21,682.96 7. 8. If the claimant is the assignee of this claim so state here:  $\mathbf{X}$ No Yes, state name of Assignor: STATE OF WASHINGTON ) SS. COUNTY OF Skagit ) Kris D Portis, being sworn, says: I am the claimant or attorney for the clamant above named; I have read or heard the forgoing claim, read and know the contents thereof, and believe the same to be true and correct and that the claim of lien if nor frivolous and is made with reasonable cause, and is not clearly excessive under penalty of perjury. Claimant or Attorney SUBSCRIBED AND SWORN TO before me this \_\_\_\_\_\_ day of \_\_\_\_\_\_ day of \_\_\_\_\_\_\_ Eccuraci C. Spephen Funk NOTARY PUBLIC in and for the State of Washington Residing at: 1010-4 6th St. ANACORTES

> 200712070024 Skagit County Auditor

My commission expires: Nov \$0, 2009