

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY



200904070046  
Skagit County Auditor

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**A. NAME & PHONE OF CONTACT AT FILER** [optional]  
Loan Service Dept. (206) 749-7328

**B. SEND ACKNOWLEDGMENT TO:** (Name and Address)

EvergreenBank  
Attn: Loan Services Dept  
1111 Third Avenue, Suite 100  
Seattle, WA 98101

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

**1. DEBTOR'S EXACT FULL LEGAL NAME** - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME  
TruckVault, Inc.

OR  
1b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

1c. MAILING ADDRESS  
315 Township Street

CITY  
Sedro Woolley

STATE  
WA

POSTAL CODE  
98284

COUNTRY  
USA

1d. SEE INSTRUCTIONS

ADD'L INFO RE ORGANIZATION DEBTOR

1e. TYPE OF ORGANIZATION  
Corporation

1f. JURISDICTION OF ORGANIZATION  
WA

1g. ORGANIZATIONAL ID #, if any  
601711887

NONE

**2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME** - insert only one 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

2d. SEE INSTRUCTIONS

ADD'L INFO RE ORGANIZATION DEBTOR

2e. TYPE OF ORGANIZATION

2f. JURISDICTION OF ORGANIZATION

2g. ORGANIZATIONAL ID #, if any

NONE

**3. SECURED PARTY'S NAME** (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME  
EvergreenBank

OR  
3b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

3c. MAILING ADDRESS  
c/o 1111 Third Avenue, Suite 100

CITY  
Seattle

STATE  
WA

POSTAL CODE  
98101

COUNTRY  
USA

4. This FINANCING STATEMENT covers the following collateral:

All Fixtures; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds) PARCEL NO. P39447 SEDRO - CITY AREA, ACRES 0.25, TAX 13AB: THOSE PORTIONS OF GOVERNMENT LOT 2, SECTION 19, TOWNSHIP 35 NORTH, RANGE 5 EAST OF THE W.M., DESCRIBED AS FOLLOWS: BEGINNING AT A POINT 183 FEET NORTH OF A POINT ON THE NORTH LINE OF THE GREAT NORTHERN RAILWAY RIGHT OF WAY WHICH INTERSECTS THE EAST LINE OF THE COUNTY ROAD ALONG THE WEST LINE OF SAID SECTION 19; THENCE NORTH 60 FEET ALONG THE EAST LINE OF THE COUNTY ROAD; THENCE EAST 120 FEET; THENCE SOUTH 60 FEET; THENCE WEST 120 FEET TO THE POINT OF BEGINNING; ALSO, BEGINNING AT A POINT 243 FEET NORTH OF A POINT ON THE NORTH LINE OF THE GREAT NORTHERN RAILWAY RIGHT OF WAY WHICH INTERSECTS THE EAST LINE OF THE COUNTY ROAD ALONG THE WEST LINE OF SAID SECTION 19; THENCE NORTH 30 FEET ALONG THE EAST LINE OF SAID COUNTY ROAD TO THE SOUTH LINE OF THAT CERTAIN TRACT CONVEYED TO CARROLL MILL COMPANY INC., BY INSTRUMENT DATED JANUARY 7, 1955, AND RECORDED JANUARY 27, 1955, UNDER AUDITOR'S FILE NO. 512357, RECORDS OF SKAGIT COUNTY, WASHINGTON; THENCE EAST ALONG THE SOUTH LINE OF SAID CARROLL TRACT 120 FEET; THENCE SOUTH 30 FEET; THENCE WEST 120 FEET TO THE POINT OF BEGINNING.

5. ALTERNATIVE DESIGNATION (if applicable):  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOBR  SELLER/BUYER  AG LIEN  NON-UCC FILING

6.  This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum  7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (OPTIONAL FEE)  All Debtors  Debtor 1  Debtor 2

8. OPTIONAL FILER REFERENCE DATA

# UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME

TruckVault, Inc.

OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:  
CL-35991

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME

OR 11b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

11d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 11e. TYPE OF ORGANIZATION 11f. JURISDICTION OF ORGANIZATION 11g. ORGANIZATIONAL ID #, if any  NONE

12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME

OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

12c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

13. This FINANCING STATEMENT covers  timber to be cut or  as-extracted collateral, or is filed as a  fixture filing.

14. Description of real estate:  
property located at 315 Township Street, Sedro Woolley, WA 98284 & 211 Township Street, Sedro Woolley, WA 98284

16. Additional collateral description:



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15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

Ralyn Properties LLC

Ray L. Sizemore

17. Check only if applicable and check only one box.

Debtor is a  Trust or  Trustee acting with respect to property held in trust or  Decedent's Estate

18. Check only if applicable and check only one box.

- Debtor is a TRANSMITTING UTILITY
- Filed in connection with a Manufactured-Home Transaction - effective 30 years
- Filed in connection with a Public-Finance Transaction - effective for 30 years