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## LICC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY	
A. NAME & PHONE OF CONTACT AT FILER [optional] Corporation Service Company 1-800-858-5294	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
51149969 - 344530	
Corporation Service Company	
801 Adlai Stevenson Drive	
Springfield, IL 62703	
Filed In: Washington	Skagit
1 DERTOP'S SYACTEUR LEGAL NAME investors to get an electron same (12 or 15) do not	ab braviata or

2 0 1 0 0 7 0 6 0 1 6 6 Skagit County Auditor 7/6/2010 Page 1 of 3 11:35AM

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. ORGANIZATION'S NAME THE BLUE COW CARWASH COMPANY, LUC MIDDLE NAME SUFFIX 1b. INDIVIDUAL'S LAST NAME FIRST NAME POSTAL CODE COUNTRY 1c. MAILING ADDRESS STATE WA USA ANACORTES 98221 1902 41ST AVENUE 1g. ORGANIZATIONAL ID #, if any ADD'L INFO RE 1e, TYPE OF ORGANIZATION ORGANIZATION 1f, JURISDICTION OF ORGANIZATION 1d. SEE INSTRUCTIONS LLC WA X 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 SUFFIX 25, INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME TATE IPOSTAL CODE COUNTRY 2c. MAILING ADDRESS crt ADD'L INFO RE | 2e, TYPE OF ORGANIZATION 2g. ORGANIZATIONAL ID#, if any 25. JURISDICTION OF ORGANIZATION 2d. SEE INSTRUCTIONS NONE DESTOR 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insertonly one secured party name (3a or 3b) 3a, ORGANIZATION'S NAME Summit Bank 3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX COUNTRY POSTAL CODE 3c. MAILING ADDRESS CITY WA 98233 USA BURLINGTON **PO BOX 805** 

4, This FINANCING STATEMENT covers the following collateral:

ALL LEASEHOLD IMPROVEMENTS AND 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 INTANGIBILES AND ACCOUNT PROCEEDS).

P19847

SW NW SW 4-34-2

THENCE N 67 DEGREES 52' 20" W A DISTANCE OF 308.27 FEET, MORE OR LESS, TO THE POINT OF THE BEGINNING.

. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR	CONSIGNEE/CONSIGNOR BAILEE/BAILOR SEI	LER/BUYER AG. LIEN NON-UCC FILING
This FINANCING STATEMENT is to be filed [for record] (or recorded ESTATE RECORDS Attach Addendum	) in the REAL 7. Check to REQUEST SEARCH REPORT(S) or [if applicable] [ADDITIONAL FEE] [options	
3. OPTIONAL FILER REFERENCE DATA		
THE BLUE COW CARWASH COMPANY LLC		51149969

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OLLOW INSTRUCTIONS (front and back) C							
Pa. ORGANIZATION'S NAME /	N RELATED FINANCING STAT	IEMENT					
THE BLUE COW CARWASH CON	PANY, LLC						
96. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDOLE N	IAME, SUFFIX				
0. MISCELLANEOUS:							
ADDITIONAL DEPTOD'S EVACT FILE				THE ABOV	E SPACE	IS FOR FILING OFF	ICE USE ONLY
1. ADDITIONAL DEBTOR'S EXACT FULL 11a. ORGANIZATION'S NAME	LEGAL NAME insert only one n	ame (11a or 11b)	- do not abbreviat	e or combine nar	nes		
		)					
11b. INDIVIDUAL'S LAST NAME		FIRST NAME		<u>·</u>	MIDDLE	NAME	SUFFIX
C. MAILING ADDRESS		СПУ			STATE	POSTAL CODE	COUNTRY
d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	111. JURISOICTI	ON OF ORGANIZ	ATION	11g. CR0	GANIZATIONAL ID #, if i	· —
. ADDITIONAL SECURED PARTYS	ASSIGNOR S/P'S	NAME - insert of	nly one name (13	a or 12hi	1		NO
12a, ORGANIZATION'S NAME		Jan Marie San			· · · · · · · · · · · · · · · · · · ·		
3			<u> </u>				
12b. INDIVIOUAL'S LAST NAME	'	FIRST NAME	and the second		MIDDLE	NAME	SUFFIX
c MARING ADDRESS	· · · · · · · · · · · · · · · · · · ·	CHY			STATE	POSTAL CODE	COUNTRY
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9TH HOLE MARKET & DELI, INC. 3495 ROSARIO ROAD .NACORTES, WA 98221		17. Check only if Debtor is a Tr					
	<u></u>	18. Check only if			<u> </u>	erty held in trust or	Decedent's Estate
		F-7		rfactured-Home T		effective 30 years	

UCC FINANCING FOLLOW INSTRUCTION	S STATEMENT S (front and back) CARE	ADDENDUM FULLY							
9. NAME OF FIRST DE			TEME	٧T					
9a. ORGANIZATION'S N	IAME								
THE BLUE COW	CARWASH COMPAN	NY, LLC			:				
9b. INDIVIDUAL'S LAST	NAME FI	RST NAME	l	MIDDLE NAME	, SUFFIX				
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OR 116, INDIVIDUAL'S LAST	F NAME		TEIDET	NAME		···			
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11c. MAILING ADDRESS		<del></del>	CITY				STATE	FIOCIAL COOP	
							SINIE	POSTAL CODE	COUNTRY
1d. SEE INSTRUCTIONS	ADD'L INFO RE 11e. T	YPE OF ORGANIZATION	11f. Ji	JRISDICTION C	F ORGAN	IZATION	11g DR	GANIZATIONAL ID #. if	300
	ORGANIZATION DEBTOR	in the second se	1	, s <sup>-</sup>	Q.		1		,
2. ADDITIONAL SEC	CURED PARTY'S or	ASSIGNOR S/P'S	NAME	insert only n	ne name	(12a or 12b)		· · · · · · · · · · · · · · · · · · ·	NON
12a. ORGANIZATION'S N		T Treston Br dir B		_ moen dray <u>s</u>	no marie	(122 01 120)	·		
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12b. INDIVIDUAL'S LAST	NAME	·	FIRST	NAME	and the second	······································	MIDDLE	NAME	SUFFIX
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<ol><li>This FINANCING STATEM collateral, or is filed as a</li></ol>		e cut or as-extracted	16. Ad	lditional collater	al descrip	tion			
4. Description of real estate:	<b>M</b>						$\Delta \Lambda$		
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. Name and address of a RE	CORD OWNER of above-de	escribed real estate							
(if Debtor does not have a r	•								AN TO
19TH HOLE MARKET 13495 ROSARIO ROA	& DELI, INC.							¥*.	7/1/20
ANACORTES, WA 98		ļ	17. Che	ck <u>only</u> if applic	able and	check <u>only</u> one b	ox,		
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			File	d in connection	with a Ma	nufactured-Home	Transaction	- effective 30 years	
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