

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

201	41	1222	001	15

A. NAME & PHONE OF CONTACT AT FILER (optional)

Corporation Service Company 1-800 1-800-858-5294

B. E-MAIL CONTAGT AT FILER (optional) SPRFiling@cscinfo.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

94442064 - 375680 Corporation Service Company 801 Adlai Stevenson Drive

Skagit County Auditor

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Springileid, IL 62703	Filed in: washington (Skagit) THE AB	OVE SPACE IS FO	R FILING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide only one Debtor name (1s or 1b) (use name will not fit in line 1b, leave all of item 1 blank, sheek here	exact, full name; do not omit, modify, or abbreviate and provide the Individual Debtor information in item	• •		
1a, ORGANIZATION'S NAME				
OR 1b. INDIVIDUAL'S SURNAME Sedillo	FIRST PERSONAL NAME Herman	ADDITION M	NAL NAME(S)/INITIAL(S)	SUFFIX
1c, MAILING ADDRESS PO Box 695	ذاτγ Darrington	STATE	POSTAL CODE 98241	COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use name will not fit in line 2b, leave all of item 2 blank, check here as	e exact full name, do not omit, modify, or abbreviate and provide the individual Debtor information in item			
2a. ORGANIZATION'S NAME				
OR 26:INDIVIDUAL'S SURNAME Sedillo	FIRST PERSONAL NAME Alejandra	ADDITION	NÄL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS PO Box 695	Darrington	STATE WA	POSTAL CODE 98241	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIG	SNOR SECURED PARTY): Provide only one Secure	d Rarty name (3a or 3b)		
3a. ORGANIZATION'S NAME 1st Security Bank of Wa	shington			
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	VAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS P. O. Box 97000	CITY Lynnwood	STATE WA	POSTAL CODE 98046	USA
COLLATERAL: This financing statement covers the following collate FURNACE HEAT PUMP	eral:			
APN: P42111				
PARCEL A:				
THE SOUTHWEST QUARTER OF THE SOL	UTHWEST QUARTER OF SECT	ION 30, TOW	NSHIP 35 NORTI	러, RANGE

5. Check only if applicable and check only one box: Collateral is held in a Trust (see	UCC1Ad, item 17 and Instructions)	being administered by a Dece	dent's Personal Representative
6a. Check only if applicable and check only one box:	· · · · · · · · · · · · · · · · · · ·	6b. Check <u>only</u> if applicable an	d check only one box:
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transmitting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Cons	ignee/Consignor Seller/Buy	er Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: :5150798910 Sedillo			94442064

6 EAST OF THE WILLAMETTE MERIDIAN. EXCEPT THE SOUTH 378 FEET THEREOF. SITUATED IN SKAGIT COUNTY, WASHINGTON.

UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS NAME OF FIRST DEBTOR. Same as line 1a or 1b on Financing Statement, if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME Sedillo FIRST PERSONAL NAME Herman ADDITIONAL NAME(S)/INITIAL(S) SUFFIX М THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only only additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debts (s name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS COUNTRY CITY STATE POSTAL CODE 11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a, ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral is filled as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest):

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17. MISCELLANEOUS: