



Skagit County Auditor

\$74.00

3/21/2016 Page

1 of

210:45AM

UCC FIN	IANCING	STATEMENT
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FOLLOW INSTRUCTIONS						
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294						
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
113333249 - 344670	7					
Corporation Service Company						
801 Adlai Stevenson Drive Springfield, IL 62703-4261 Filed In:	itta ahin atau					
Springileid, ic 62703-4261 * Filed in:	Washington (Skagit)					
	(0/10/91/)	THE ABOVE S	SPACE IS FO	R FILING C	FFICE USE OI	VLY
DEBTOR'S NAME: Provide only one Debter name (1 a or 1b) (tise exact, full name will not fit in line 1b, leave all of item 1 blank, check here	name; do not omit, modify, or the Individual Debtor informa					
1a. ORGANIZATION'S NAME DERRER DESIGNS, LTD.						
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	VAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 1977 WESTAR LANE	¶gi⊤γ ————————————————————————————————————		STATE	POSTAL CO	DD€	COUNTRY
	BURLINGTON		WA	98233		USA
	name; do not omit, modify, or the Individual Debtor informa					
28. ORGANIZATION'S NAME EDDYLINE KAYAKS, LLC						
OR Zb. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S	SUFFIX		
2c. MAILING ADDRESS 1977 WESTAR LANE	CITY		STATE	POSTAL CO	DDE	COUNTRY
157. 11.257.11.2	BURLINGTON	1	WA	98233		USA
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC	URED PARTY); Provide only	One Secured Party	name (3a or 3b)		
3a. ORGANIZATION'S NAME Skagit Bank	(
OR 36. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 301 E. Fairhaven Ave	CITY		STATE	POSTAL CO	DDE	COUNTRY
	Burlington		[WA	98233		USA
COLLATERAL: This financing statement covers the following collateral: Accounts; Chattel Paper; Deposit Accounts; Docum	ents; Equipment, I	ixtures; Ge	neral Inta	, ngibles;	Goods and	all
accessions thereto and goods with which the goods						
Promissory Notes; Software; Patents; Copyrights be						
foregoing is owned now or acquired later; all access	sions, additions, re	placements,	, and subs	titutions	relating to	any of the
foregoing; all records of any kind relating to any of t						
P115574			4	Sandan Sanda Sanda		
Amended Skagit Regional Airport Binding Site Plan	Phase 1 Lot 17	Acres 2.5. A	F# 20030	3040030) (Formerly	Skadit
Regional Airport Blinding Site Plan Phase 1 AR# 86						
Binding Site Plan Phase 1 AF# 8608250002	0020002). 7 11 /1 2	,000001000	(
Real property located at 15400 Airport Dr., Burlington	on WA 98233					
5. Check only if applicable and check only one box. Collateral is held in a Trus	(see UCC1Ad, item 17 and Ir	istructions)	being administe	red by a Dec	edent's Personal	Representative
6a. Check only if applicable and check only one box:		6	ib. Check <u>only</u> i	f applicable a	ind check only on	and the same of th
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transm			tural Lien	Non-UCC F	100
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor	Seller/Buyer	I I Ba	ilee/Bailor	Liticense	ee/Licensor
8. OPTIONAL FILER REFERENCE DATA:						

NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State	tement; if line 1b was left blank	1			
because Individual Debtor name did not fit, check here		ŀ			
99. ORGANIZATION'S NAME DERRER DESIGNS, LTD.					
		İ			
R 9b. INDIVIDUAL'S SURNAME					
FIRST PERSONAL NAME		}			
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE	SPACE I	S FOR FILING OFFICE	USE ONLY
D. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtar do not omit, modify, or abbreviate any part of the Debtar's name) and en		n line 1b or 2b of the	Financing S	tatement (Form UCC1) (us	e exact, full name,
10a. ORGANIZATION'S NAME	and the second s				
R 10b. INDIVIDUAL'S SURNAME	77				
INDIVIDUAL'S FIRST PERSONAL NAME	7/_>			<u> </u>	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		-	,		SUFFIX
oc. MAILING ADDRESS	City		STATE	POSTAL CODE	COUNTRY
. ADDITIONAL SECURED PARTY'S NAME or A	SSIGNOR SECURED PARTY	S NAME: Provide	only <u>one</u> na	me (11a or 11b)	
11a. ORGANIZATION'S NAME		Ž			
R 11b INDIVIDUAL'S SURNAME	TFIRST PERSONAL NAME	A STATE OF THE PARTY OF THE PAR	JADDITKO	NAL NAME(S)/INITIAL(S)	SUFFIX
The management of the manageme					
c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):					
This FINANCING STATEMENT is to be filed [for record] (or recorde REAL ESTATE RECORDS (if applicable)	ed) in the 14. This FINANCING STATE	MENT:			
	covers timber to be	_	-extracted	collateral [] is tiled as	a fixture fili∩g
	m 16 16. Description of real estate		**************************************		ODT
Name and address of a RECORD OWNER of real estate described in ite (if Debtor does not have a record interest):	i '		CAL-III I	KEGIONAL AIRL	*#J
Name and address of a RECORD OWNER of real estate described in ite (if Debtor does not have a record interest): Port of Skagit County	Parcel P115574 A				. 74 ⊏
Name and address of a RECORD OWNER of real estate described in ite (if Debtor does not have a record interest): Port of Skagit County 5400 Airport Dr	Parcel P115574 A BINDING SITE PL	LAN, PHASE	1, LOT	17, ACRES 2.50	Parties.
. Name and address of a RECORD OWNER of real estate described in ite	Parcel P115574 A BINDING SITE PI 200303040030 (F	LAN, PHASE ORMERLY S	1, LOT KAGIT	17, ACRES 2.50 REGIONAL AIR	PORT
Name and address of a RECORD OWNER of real estate described in ite (if Debtor does not have a record interest): Port of Skagit County 5400 Airport Dr	Parcel P115574 A BINDING SITE PL	LAN, PHASE ORMERLY S LAN PHASE	1, LOT KAGIT 1 AF#8	17, ACRES 2,50 REGIONAL AIR 608250002), AF#	PORT