

201801080040

1 of

Skagit County Auditor 1/8/2018 Page

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UCC FINANCING STATEMENT FOLLOWINSTRUCTIONS

A NAME & PHONE OF CONTACT AT FILER (optional) Diana Norberg (509) 327-9634	
(303) 327-3034	
B. E-MAIL CONTACT AT TLER (optional)	
dianan@upfservices.com	
C. SEND ACKNOWLEDGMENT TO (Name and Address)	
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UPF Services	ı
12410 E. Mirabeau Parkway, Ste 100	
Spokane Valley, WA 99216	

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12410 E. Mirabeau Parkway, St	te 100		
ຸSpokane Valley, WA 99216			
	THE ABO	OVE SPACE IS FOR FILING OFFICE USE OF	NI Y
DEBTOR'S NAME: Provide only one Debtor name (1e or 1b) (uname will not fit in line 1b. leave all of item 1 blank, oneck here 1a, ORGANIZATION'S NAME	use esact full name; do not omit, modify, or abbreviate	any part of the Debtor's name); if any part of the Indi	vidual Debtor's
THE ORGANIZATIONS NAME	and the state of t		
OR 15 INDIVIDUAL'S SURNAME BEHRENDT	REBECCA	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
3403 Field Ave	Anacortes	WA 98221-	USA
 DEBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) (uname will not fit in line 2b, leave all of item 2 blank, check here 			
2a ORGANIZATION'S NAME	and programs individual best of information in the	en 10 of the Financing Statement Addendum (Form C	
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
			USA
3. SECURED PARTY'S NAME. (or NAME of TOTAL ASSIGNED 3a. ORGANIZATION'S NAME.	of ASSIGNOR SECURED PARTY). Provide only o	ne secured party name (3a or 3b)	
	it Union		
Plinet Spling Cooperative Cred			SUFFIX
Puget Sound Cooperative Cred OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIA
AD	and the second s	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
OR 3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS	FIRST PERSONAL NAME	STATE POSTAL CODE	COUNTRY
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		
or 3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS 600 108th Ave NE Suite #1035 4. COLLATERAL: This financing statement covers the following	CITY Bellevue	STATE POSTAL CODE VVA 98004	COUNTRY
OR 3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS 600 108th Ave NE Suite #1035 4. COLLATERAL: This financing statement covers the following 4.8KW SOLARSYSTEM: 16 ITEK PANE	CITY Bellevue COULTER BOOK MICRO INVE	STATE POSTAL CODE WA 98004 ERTERS ALONG WITH AFTER	COUNTRY
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5. Check only if applicable and check only one box:	Collateral is held in a Trust (see UCC1Ad, item 17 a	and Instructions)	being administered by a De	ceden't Personal Représentative
6a. Check only if applicable and check only one box: 6b. Check only if applicable and check only one box:				
Public-Finance Transaction Manu	factured-Home Transaction A Debtor is a Trasmi	itting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATE DESIGNATION (if applicable):	Lessee/Lessor Consignee/Consignor	Seller/Buye	Bailee/Bailor	Licensee/Licenser
8. OPTIONAL FILER REFERENCE DATA UPF Tracking #4470568-37847	Loan#		SBA Loan #	