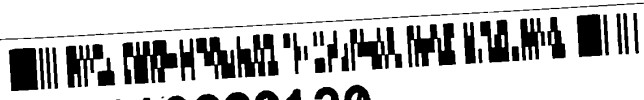


When recorded return to:
Joseph D Woodmansee and Kimberly A
Woodmansee
PO Box 1437
Mount Vernon, WA 98273


201810220130
10/22/2018 01:36 PM Pages: 1 of 2 Fees: \$100.00
Skagit County Auditor

Filed for record at the request of:



CHICAGO TITLE
COMPANY OF WASHINGTON

425 Commercial St
Mount Vernon, WA 98273

Escrow No.: 620036341

CHICAGO TITLE
620036341

QUIT CLAIM DEED

THE GRANTOR(S)

Division Street, LLC, a Washington limited liability company

for and in consideration of Mere change in name in hand paid, conveys and quit claims to

Joseph D Woodmansee and Kimberly A Woodmansee, a married couple

the following described real estate, situated in the County of Skagit, State of Washington together with all after acquired title of the grantor(s) herein:

Lot 2, Short Plat No. MV-5-90, approved May 29, 1990 and recorded August 10, 1990 in Volume 9 of Short Plats, page 252, under Auditor's File No. 9008100069; being a portion of Tract B of Revised Short Plat No. MV-23-76, and a portion of the Southwest Quarter of the Southwest Quarter of Section 17, Township 34 North, Range 4 East, W.M.

Situated in Skagit County, Washington.

Abbreviated Legal: (Required if full legal not inserted above.)

Tax Parcel Number(s): P104679 / 340417-0-027-0200

**SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX**

20184678
OCT 22 2018

Amount Paid \$0
Skagit Co. Treasurer
By *man* Deputy

QUIT CLAIM DEED
(continued)

Dated: October 18, 2018

Division Street, LLC

BY: *[Signature]*
Joseph D. Woodmansee
Manager

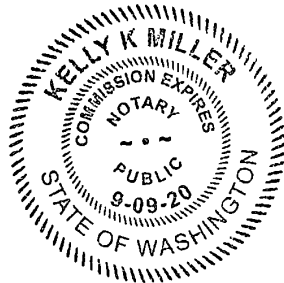
BY: *[Signature]*
Kimberly A. Woodmansee
Manager

State of Washington

County of Skagit

I certify that I know or have satisfactory evidence that Joseph D. Woodmansee and Kimberly A. Woodmansee are the persons who appeared before me, and said person acknowledged that they signed this instrument, on oath stated that they were authorized to execute the instrument and acknowledged it as the Managers of Division Street, LLC to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated: October ^{19th} 22, 2018



[Signature]
Name: Kelly K. Miller
Notary Public in and for the State of WA _____
Residing at: Mount Vernon _____
My appointment expires: Sept. 9, 2020 _____