	G STATEMENT	11				
	NS (front and back) CAREFULLY CONTACT AT FILER [optional]	20	0181022	20	152	
ND ACKNOWLED	GMENT TO: (Name and Address)	10/2	2/2018 03:18 PM		ages: 1 of 8	Fees: \$106.00
Maxfield, Gary-	-Dean:	— Skagi	it County Auditor			
6 c/o 417 N Anace Burlington, WA	ortes Street 1 [98233], USA	1				
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		ı ı				
OTODIO EVACTA	THE LEGAL MANEY		THE ABOVE SPACE I	S FO	R FILING OFFICE L	ISE ONLY
	FULL LEGAL NAME - insert only one debtor name (1a NAME SKAGIT BANK	or 1b) - do not abbreviate or c	ombine names			
INDIVIDUAL'S LAST	NAME	FIRST NAME	IMIC	DDLE	VAME	SUFFIX
ING ADDRESS 301	E FAIRHAVEN AVE	CITY BURLINGTON	STA W.	ATE IA	POSTAL CODE	COUNTRY
INSTRUCTIONS	ORGANIZATION SUBSIDIARY  DEBTOR	11. JURISDICTION OF OR WASHINGTON	GANIZATION 1g.	ORGA	I NIZATIONAL ID #, if an	y NONE
ITIONAL DEBTO	R'S EXACT FULL LEGAL NAME - insert only one	debtor name (2a or 2b) - do no	l abbreviate or combine names	3		
ORGANIZATION 3 N	PAIRC					
. INDIVIDUAL'S LAST	NAME	FIRST NAME	MID	DLE	NAME	SUFFIX
LING ADDRESS		СПУ	ST/	ATE	POSTAL CODE	COUNTRY
INSTRUCTIONS	. ADD'L INFO RE   2e, TYPE OF ORGANIZATION	2f. JURISDICTION OF OR	GANIZATION 2g.	ORGA	NIZATIONAL ID#, if an	w .
	ORGANIZATION DESTOR				·	NONE
CURED PARTY'S	S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR	( S/P) - insert only one secure	d party name (3a or 3b)			
, INDIVIDUAL'S LAST	NAME Maxfield	FIRST NAME Gary-Dea	in:	MIDDLE NAME		SUFFIX
LING ADDRESS c/o	417 N Anacortes Street	CITY Burlington		ATE	POSTAL CODE	COUNTRY
			W		[98233]	1 034

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		437706	2018 A	ug 2	28 PM01:4	5
UCC FINANCING STATI	pack) CAREFULLY					
9. NAME OF FIRST DEBTOR (1a or 9a, ORGANIZATION'S NAME SKAGIT		TEMENT				
OR 95. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS:						
			THE ABOVE	SPACE	IS FOR FILING OFFICE	USE ONLY
11. ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only one n	ame (11a or 11b) - do not abbrev	riate or combine name	s		
OR 116, INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS		СПУ		STATE	POSTAL CODE	COUNTRY
11d. SEE INSTRUCTIONS ADD'T INFO ORGANIZA DEBTOR	D RE 11e. TYPE OF ORGANIZATION TION	111. JURISDICTION OF ORGA	NIZATION	11g. OR0	GANIZATIONAL ID #, if any	NONE
12. ADDITIONAL SECURED PA 12a. ORGANIZATION'S NAME	RTY'S er ASSIGNOR S/P'S	NAME - insert only one name	(12a or 12b)			
OR 12b. INDIVIOUAL'S LAST NAME		FIRST NAME	· · · · · · · · · · · · · · · · · · ·	MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS		ату		STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers collateral, or is filed as a fixture filing. 14. Description of real estate:		16. Additional collateral descri	iption:	1		<u> </u>
		-				
15. Name and address of a RECORD OWN (if Debtor does not have a record interest						
		17. Check only if applicable ar Debtor is a Trust or 18. Check only if applicable ar	Trustee acting with re	spect to p	property held in trust or	Decedent's Estate
		X Debtor is a TRANSMITTING Filed in connection with a	Manufactured-Home			

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	018 Aug 31 AM11:2	29
		SE ONLY
FIRST NAME	MIDDLE NAME	SUFFIX
CITY BURLINGTON	STATE POSTAL CODE WA 98233	COUNTRY
11. JURISDICTION OF ORGANIZATION WASHINGTON	N 1g. ORGANIZATIONAL ID #, if any	, □ NC
debtor name (2a or 2b) - do not abbreviate	or combine names	
FIRST NAME	MIDDLE NAME	SUFFIX
СПУ	STATE POSTAL CODE	COUNTRY
21. JURISDICTION OF ORGANIZATION	N 2g. ORGANIZATIONAL ID #, if any	,
R S/P) - insert only one secured party name	e (3a or 3b)	
FIRST NAME Gary-Dean	MIDDLE NAME	SUFFIX
CITY Burlington	STATE POSTAL CODE WA (98233)	COUNTRY
	FIRST NAME  CITY BURLINGTON  1/LJURISDICTION OF ORGANIZATIO WASHINGTON  FIRST NAME  CITY  2/LJURISDICTION OF ORGANIZATIO  FIRST NAME  CITY  2/LJURISDICTION OF ORGANIZATIO  R S/P) - insert only one secured party name  FIRST NAME Gary-Dean	CITY BURLINGTON  STATE POSTAL CODE WA 98233  11. JURISDICTION OF ORGANIZATION  In JURISDICTION OF ORGANIZATION  debtor name (2a or 2b) - do not abbreviate or combine names  FIRST NAME  MIDDLE NAME  21. JURISDICTION OF ORGANIZATION  22. ORGANIZATIONAL ID #, if any  R S/P) - insert only one secured party name (3a or 3b)  FIRST NAME  MIDDLE NAME

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER	AG. LIEN	NON-UCCFILING
6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL 7, Check to REQUEST SEARCH REPORT(S) on Debtor(s) [6] applicable] [7] (ADDITIONAL FEE] [7] (optional)	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA COPYRIGHT NOTICE # GDM-082759-CLC / INVOICE #S 2302, 2304, 2306; TOTAL LIEN AMOUNT:		
\$1,627,500.00		

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		438391	<b>2018 A</b> u	g 3	31 AM11:29
UCC FINANCING STATE			1		
9. NAME OF FIRST DEBTOR (front and ba 9. NAME OF FIRST DEBTOR (1a or 1 9a. ORGANIZATION'S NAMESKAGIT B	b) ON RELATED FINANCING STA	TEMENT			
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFF	īx		
10. MISCELLANEOUS;					
			THE ABOVE SP	ACEI	S FOR FILING OFFICE
11. ADDITIONAL DEBTOR'S EXACT I	FULL LEGAL NAME - insert only one r	name (11a or 11b) - do not abb	reviate or combine names		
OR 116, INDIVIDUAL'S LAST NAME		FIRST NAME	MI	DDLE I	NAME
11c, MAILING ADDRESS		СПУ	Sī	ATE	POSTAL CODE
12. ADDITIONAL SECURED PAR	RE 110. TYPE OF ORGANIZATION INTO A SSIGNOR S/P'S	11f. JURISDICTION OF ORG	·	g. ORG	I ANIZATIONAL ID #, if any
12a. ORGANIZATION'S NAME					
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MI	DDLE N	NAME
12c. MAILING ADDRESS		CITY	Sı	ATE	POSTAL CODE
This FINANCING STATEMENT covers collateral, or is filed as a fixture filing fixture filing fixed estate:	_1 11	16. Additional collateral des	scription:		
15. Name and address of a RECORD OWNE (if Debtor does not have a record interest)					
fit maning mean unit usana a uscono upiticest)	•	17. Check only if applicable	and check aniu and hav		
			Trustee acting with respe	ct to pr	operty held in trust or
		<u> </u>			
		X Debtor is a TRANSMITT	ING UTILITY  a Manufactured-Home Tran	saction	effective 30 years

B. E-MAIL CONTACT AT FILER (optional)  GM-92@hotmail.com  C. SEND ACKNOWLEDGMENT TO: (Name and Address)  Gary-Dean: Maxfield  c/o 417 N. Anacortes Street  Burlington WA USA [98233]		Time of Filing: File Number: Lapse Date:			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)  Gary-Dean: Maxfield  c/o 417 N. Anacortes Street		Lapse Date : 1	NONE		
c/o 417 N. Anacortes Street	口				
Durington WA Con [20205]					
	1				
				R FILING OFFICE USE	
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, funame will not fit in line 1b, leave all of item 1 blank, check here and provide 1a. ORGANIZATION'S NAME	ull name; do not omit, de the Individual Debto	modify, or abbreviate any pa or information in item 10 of th	art of the Debtor's	s name); if any part of the Internet Addendum (Form U	cc1Ad)
SKAGIT BANK					
Tb. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
301 E FAIRHAVEN AVE	BURLINGTON		STATE WA	POSTAL CODE 98233	USA
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, for	ull name; do not omit,	modify, or abbreviate any pa	art of the Debtor's	s name); if any part of the In	dividual Debi
name will not fit in line 2b, leave all of item 2 blank, check here and provide 2a. ORGANIZATION'S NAME	de the Individual Debte	or information in item 10 of t	he Financing Sta	itement Addendum (Form U	
Za. URGANIZATION'S NAME					
R 2b. INDIVIDUAL'S SURNAME	FIRST PERSONA	IL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
: MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTR
, III III 13 133 133					
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SE 3a. ORGANIZATION'S NAME	CURED PARTY): Pro	vide only <u>one</u> Secured Party	name (3a or 3b	)	
R 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Maxfield	Gary-Dean:			T	00111127
					USA
	Duringe		,,,,,,		
3c. MAILING ADDRESS 417 N. Anacortes Street 4. COLLATERAL: This financing statement covers the following collateral: This is an informational filing for National UCC-1 F Department of State Office of the Uniform Commerce	Burlingto			[98233] file with the New	Ţ

8. OPTIONAL FILER REFERENCE DATA: Informational IICC-1 for Nationa IICC-1 # 201808288303228 on file in New York

## **Skagit County Properties**

Collateral for National Ucc-1 financing statement filing # 201808318400272

Collateral for National Ucc-1 financing statement filing # 201808288393228

#1

P55124 1400 Commercial Ave. Anacortes, WA. 98221

Legal Description at time of Assessment:

This is the legal description as of the most recent certification of the assessment roll. The Current Legal Description reflects any changes resulting from boundary modifications after certification.

ANACORTES LTS 1 TO 3 BLK 43 TGW PTN ABAND R/W THRU BLK 43 DAF BAT NW COR LOT 3 BLK 43 TH SELY ALG WLY LN OF SD LT 3 & WLY LN OF LOT 2 TO N LN OF ALLY TH WLY ALG N LN OF ALLY TO SELY COR LT 4 TH NWLY ALG NELY LN OF SD LT 4 TO N LN OF SD BLK 43 TH E ALG N LN TPOB

#2

P71950 301 E. Fairhaven Ave. Burlington, WA. 98233

Legal Description at time of Assessment:

This is the legal description as of the most recent certification of the assessment roll. The Current Legal Description reflects any changes resulting from boundary modifications after certification.

BURLINGTON S1/2 OF 8 TO 10 BLK 97 DK 12

P71948 301 E. Fairhaven Ave. Burlington, WA. 98233

Legal Description at time of Assessment:

This is the legal description as of the most recent certification of the assessment roll. The Current Legal Description reflects any changes resulting from boundary modifications after certification.

BURLINGTON LOTS 6 & 7 BLK 97 DK 12

#3

P114421 1620 Continental Pl. Mount Vernon, WA.98273

## Legal Description at time of Assessment:

This is the legal description as of the most recent certification of the assessment roll. The Current Legal Description reflects any changes resulting from boundary modifications after certification.

(DK17) LOT 1 OF BINDING SITE PLAN NO. MV-1-98 AF#9904200113 LOCATED IN NE1/4 SW1/4

#4

P54176 901 S. Cleveland Ave. Mount Vernon, WA. 98273

## Legal Description at time of Assessment:

This is the legal description as of the most recent certification of the assessment roll. The Current Legal Description reflects any changes resulting from boundary modifications after certification.

RIVERSIDE TO MT VERNON N 85FT LTS 1 & 2 BLK 7 DK 3

#5

P26319 1301 Memorial Hwy. Mount Vernon, WA.98273 Legal Description at time of Assessment:

This is the legal description as of the most recent certification of the assessment roll. The Current Legal Description reflects any changes resulting from boundary modifications after certification.

TAX 23AAAB PTN GV LT 2 DESC BAT NE C LT DK 1 2 TH S 0-52-35 W ALG E LI SD SUB 620.25 FT TH N 89-07-25 W 30.00FT TAP ON N R/W LI OF MEMORIAL HWY & WH PT IS TPOB TH N 0-51-35 E PLT & 30.00FT W OF E LI SD SU B414.37FT TH S 37-58-40 W 335.07FT TAP O NSD N

R/W LI SD HWY TH S 52-01-20 E ALG SD N R/W LI SD HWY 118.58FT TH ALG A CR TO LFT HAV RAD OF 1879.86FT AN ARC DIST OF 131.49FT TPB

#6

P76551 300 Ferry St. Sedro-Woolley, WA. 98284

Legal Description at time of Assessment:

This is the legal description as of the most recent certification of the assessment roll. The Current Legal Description reflects any changes resulting from boundary modifications after certification.

PARCEL Z OF SURVEY AF#201010080150 DESCRIBED AS FOLLOWS: LOTS 3, 4, 5, 6, 7 AND 8, BLOCK 4, REPLAT OF THE JUNCTION ADDITION TO SEDRO, RECORDED IN VOLUME 3 OF PLATS, PAGE 48, RECORDS OF SKAGIT COUNTY, WASHINGTON.