

**201812260002**12/26/2018 08:37 AM Pages: 1 of 3 Fees: \$101.00
Skagit County Auditor**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Capital Community Bank 801-705-4393
B. E-MAIL CONTACT AT FILER (optional) solarloansupport@ccbankutah.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Capital Community Bank 1909 W State Street Pleasant Grove, UT 84062

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME Smith & Vallee Woodworks, Inc.				
OR				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
1c. MAILING ADDRESS 5742 Gilkey Avenue		CITY Bow	STATE WA	POSTAL CODE 98232
			COUNTRY USA	

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S SURNAME Smith	FIRST PERSONAL NAME Wesley	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
2c. MAILING ADDRESS 14050 Mac Taggart Ave		CITY Bow	STATE WA	POSTAL CODE 98232
			COUNTRY USA	

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME Capital Community Bank				
OR				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3c. MAILING ADDRESS 1909 W. State Street		CITY Pleasant Grove	STATE UT	POSTAL CODE 84062
			COUNTRY USA	

4. COLLATERAL: This financing statement covers the following collateral:

The collateral described below is located at: **5715 Gilkey Ave, Bow, WA 98232**
PURCHASE MONEY SECURITY INTEREST IN SOLAR PRODUCT FIXTURES: ALL OF THE DEBTOR'S RIGHT, TITLE AND INTEREST IN PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT (IF ANY), INCLUDING BUT NOT LIMITED TO ROOFTOP OR GROUND MOUNT SOLAR PANELS, ELECTRICAL INVERTERS, MICROINVERTERS OR POWER OPTIMIZERS, CABLES AND WIRES, SUPPORT BRACKETS, RELATED EQUIPMENT, AND ADDITIONS OR REPLACEMENTS OF THE SAME. IN ADDITION, THE SECURITY INTEREST INCLUDES ALL WARRANTIES ISSUED WITH RESPECT TO THE REFERENCED COLLATERAL.

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5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility	
6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA: 50087743	

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. 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 <input type="checkbox"/>	
9a. ORGANIZATION'S NAME Smith & Vallee Woodworks, Inc.	
OR	
9b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one 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 Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME					
OR					
10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX	
10c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME				
OR				
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. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATEMENT: <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input checked="" type="checkbox"/> is filed as a fixture filing
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): NORTH EDISON PROPERTIES LLC 5715 GILKEY AVE EDISON, WA 98232	16. Description of real estate: PARCEL P72949 See Exhibit A

17. MISCELLANEOUS:

Exhibit A

(0.5700 ac) LOTS 11, EXCEPT THE SOUTH 16.00 FEET (AS MEASURED PERPENDICULAR TO THE SOUTH LINE) THEREOF, AND 12 AND THE SOUTH 12.00 FEET (AS MEASURED PERPENDICULAR TO THE SOUTH LINE) OF LOT 13, ALL IN BLOCK 1, TOWN PLAT OF EDISON (HALLER'S ADDITION), AS PER PLAT RECORDED IN VOLUME 1 OF PLATS, PAGE 7, RECORDS OF SKAGIT COUNTY, WASHINGTON. TOGETHER WITH THAT PORTION OF VACATED GILKEY AVENUE WHICH WOULD ATTACH THERETO BY OPERATION OF LAW. EXCEPT THAT PORTION OF SAID VACATED GILKEY AVENUE DESCRIBED AS FOLLOWS: BEGINNING AT THE SOUTHEAST CORNER OF SAID LOT 11; THENCE NORTH 89-13-30 EAST ALONG THE EXTENSION OF THE SOUTH LINE OF SAID LOT 11, A DISTANCE OF 9.13 FEET TO THE TRUE POINT OF BEGINNING; THENCE NORTH 00-58-57 EAST A DISTANCE OF 33.02 FEET TO THE EXTENSION OF THE NORTH LINE OF SAID LOT 11; THENCE NORTH 89-13-30 EAST ALONG SAID LINE A DISTANCE OF 11.14 FEET; THENCE SOUTH 00-46-30 EAST A DISTANCE OF 33.00 FEET TO THE EXTENSION OF THE SOUTH LINE OF SAID LOT 11; THENCE SOUTH 89-13-30 WEST A DISTANCE OF 12.15 FEET TO THE TRUE POINT OF BEGINNING. TOGETHER WITH LOTS 3, 4 AND THE SOUTH 12.00 FEET (AS MEASURED PERPENDICULAR TO THE SOUTH LINE) OF LOT 5, BLOCK 3, TOWN PLAT OF EDISON (HALLER'S ADDITION), AS PER PLAT RECORDED IN VOLUME 1 OF PLATS, PAGE 7, RECORDS OF SKAGIT COUNTY, WASHINGTON. TOGETHER WITH PORTION OF VACATED GILKEY AVENUE WHICH WOULD ATTACH BY OPERATION OF LAW., 33 /33 /03