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Skagit County Auditor, WA

Chronos Mortgage Solutions 12410 E. Mirabeau Parkway, Ste 1 Spokane Valley, WA 99216	00	/E SPACE IS FOR FILING OFFICE USE O	NLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use examame will not fit in line 1b, leave all of ilem 1 blank, check herean	act full name; do not omit, modify, or abbreviate ar d provide the Individual Debtor information in item		
1a. ORGANIZATION'S NAME DARWIN L HELMUTH REVOCAB 1b. INDIVIDUAL'S SURNAME	LE LIVING TRUST	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
a MAILING ADDRESS B12 F Ave	Anacortes	STATE POSTAL CODE WA 98221	COUNTRY
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME HELMUTH 3. MAILING ADDRESS 24.2 E. A.V.O.	FIRST PERSONAL NAME DARWIN CITY	ADDITIONAL NAME(SYINITIAL(S) L STATE POSTAL CODE	SUFFIX
312 F Ave SECURED PARTY'S NAME: (or NAME of TOTAL ASSIGNEE of AS 3a ORGANIZATION'S NAME	Anacortes SSIGNOR SECURED PARTY): Provide only one	WA 98221 secured party name (3a or 3b)	USA
Puget Sound Cooperative Credit U	Inion		
R 35. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
mailing address 600 108th Ave NE Suite #1035	сіту Bellevue	WA 98004	COUNTRY
COLLATERAL: This financing statement covers the following collate 11.5 KW SOLAR, 37 SILFAB PANELS, 37 E FIXTURES PERTAINING TO ENERGY EFF AVENUE, ANACORTES, WA 98221 AS DOO	NPHASE MICROINVERTERS ICIENCY UPGRADES AT THE CUMENTED ON SUBSEQUE	PROPERTY LOCATED AT:	812 F ORM(S).

5. Check only if applicable and check only one box: Collateral isheld in a Trust (see UCC1Ad, item 17 and instructions)	being administered by a Deceden't Personal Represer
6a. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction A Deblor is a Trasmitting Utility	6b. Check only if applicable and check only one box: Agricultural Lien : Non-UCC Filing
7. ALTERNATE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/	
8. OPTIONAL FILER REFERENCE DATA Chronos Tracking #5470631-43851 Loan #	SBA Loan #