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Skagit County Auditor, WA

Α	NAME & PHONE OF CONTACT AT FILER (optional)							
В	CSC 1-800-858-5294 E-MAIL CONTACT AT FILER (optional)							
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С	SEND ACKNOWLEDGMENT TO: (Name and Address)	1						
	1700 95448 CSC 801 Adlai Stevenson Drive							
	Springfield, IL 62703	Filed In: Washington (Skagit)						
1	DEBTOR'S NAME: Provide only one Debtor name (1a or 1b)	(use exact full name; do not omit			OR FILING OFFICE USE			
	name will not fit in line 1b, leave all of item 1 blank, check here [1a. ORGANIZATION'S NAME OUTDOOR SKAGIT,	and provide the Individual Debte						
OF	1b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
1c.	MAILING ADDRESS 11977 WESTAR LN	CITY BURLING	ON	STATE WA	POSTAL CODE 98233-3620	COUNTRY		
2.	DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) name will not fit in line 2b, leave all of item 2 blank, check here	(use exact, full name; do not omit, and provide the Individual Debt						
	2a. ORGANIZATION'S NAME	Y						
OF	2b. INDIVIDUAL'S SURNAME	FIRST PERSONA	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)			
2c.	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY		
3.	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 Heritage Bank]							
OF	3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
Зс.	MAILING ADDRESS P.O. Box 1578	сіту Olympia		STATE	POSTAL CODE 98507	COUNTRY		
r	COLLATERAL: This financing statement covers the following of All Fixtures at 1868-1970 Walton Drive, B now or acquired later; all accessions, add ecords of any kind relating to any of the for	itions, replacements, a oregoing	nd substitutions re	nether ar lating to	ny of the foregoing any of the foregoin	is owned		
5	Short Legal Description: Lots 14 & 15 Bur	lington Hill Business P	ark.					
	Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is	held in a Trust (see UCC1Ad, item			ered by a Decedent's Persona			
	Check only if applicable and check only one box: Collateral is Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home			. Check <u>only</u>	ered by a Decedent's Person. If applicable and check only tural Lien Non-UCC	one box:		

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 9a. ORGANIZATION'S NAME OUTDOOR SKAGIT, LLC 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) 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 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS COUNTRY STATE POSTAL CODE CITY 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 POSTAL CODE COUNTRY CITY STATE 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate (if Debtor does not have a record interest): TRACTS 14 AND 15, OF "BURLINGTON HILL BUSINESS PARK, BINDING SITE PLAN", APPROVED SEPTEMBER 7, 1994, RECORDED SEPTEMBER 8, 1994 IN VOLUME 11 0F SHORT PLATS, PAGES 109 THROUGH 112, UNDER AUDITOR'S FILE NO. 9409080052, RECORDS OF SKAGIT COUNTY WASHINGTON; BEING A PORTION OF THE SOUTHWEST 1/4 OF SECTION 29, TOWNSHIP 35 NORTH, RANGE 4 EAST, W.M. 17. MISCELLANEOUS: