ign Envelope ID: 56FA889B-8	Envelope ID: 56FA889B-8446-4865-8272-C0472BC450AC		202003020103 03/02/2020 12:53 PM Pages: 1 of 3 Fees: \$1 Skagit County Auditor, WA		Fees: \$10
JCC FINANCING STA FOLLOW INSTRUCTIONS	TEMENT				
A. NAME & PHONE OF CONTAC	T AT FILER (optional)				
B. E-MAIL CONTACT AT FILER (optional)				
	·				
C. SEND ACKNOWLEDGMENT 1	O: (Name and Address)				
Craft3		1			
42 7th Street, Suite	100				
Astoria, OR 97103		,			
		┙┃	AROVE SPACE IS EC	OR FILING OFFICE USE	ONI Y
. DEBTOR'S NAME: Provide onl	y one Debtor name (1a or 1b) (use exact, fi				
	of item 1 blank, check here and provide				
1a. ORGANIZATION'S NAME					
R 1b. INDIVIDUAL'S SURNAME	<u> </u>	FIRST PERSONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	ISUFFIX
Howard		Danielle	Louis		
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
DO D 0		Concrete	WA	98237	USA
DEBTOR'S NAME: Provide onl name will not fit in line 2b, leave all of 2a. ORGANIZATION'S NAME	y <u>one</u> Debtor name (2a or 2b) (use exact, function of item 2 blank, check here and provided and		tem 10 of the Financing St		
DEBTOR'S NAME: Provide onl name will not fit in line 2b, leave all 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME Howard		de the Individual Debtor information in i	tem 10 of the Financing St ADDITIC John	alement Addendum (Form U	CC1Ad)
DEBTOR'S NAME: Provide onl name will not fit in line 2b, leave all 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME Howard c. MAILING ADDRESS		de the Individual Debtor information in i	tem 10 of the Financing St	atement Addendum (Form U	CC1Ad)
DEBTOR'S NAME: Provide onl name will not fit in line 2b, leave all a 2a. ORGANIZATION'S NAME 2a. INDIVIDUAL'S SURNAME Howard a. MAILING ADDRESS PO Box 2 SECURED PARTY'S NAME 3a. ORGANIZATION'S NAME		de the Individual Debtor information in information	ADDITIC John STATE WA	NAL NAME(S)/INITIAL(S) POSTAL CODE 98237	SUFFIX COUNTRY
DEBTOR'S NAME: Provide onl name will not fit in line 2b, leave all a 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME Howard c. MAILING ADDRESS PO Box 2 SECURED PARTY'S NAME 3a. ORGANIZATION'S NAME Craft3	of item 2 blank, check here and provide	de the Individual Debtor information in information	ADDITIC John STATE WA cured Parly name (3a or 3)	NAL NAME(S)/INITIAL(S) POSTAL CODE 98237	SUFFIX COUNTRY
DEBTOR'S NAME: Provide onl name will not fit in line 2b, leave all of 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME HOWARD c. MAILING ADDRESS PO Box 2 SECURED PARTY'S NAME 3a. ORGANIZATION'S NAME Craft3 3b. INDIVIDUAL'S SURNAME	of item 2 blank, check here and provide	FIRST PERSONAL NAME Joshua CITY Concrete CURED PARTY): Provide only one Se	ADDITIC ADDITIC ADDITIC ADDITIC	POSTAL CODE 98237 ENAL NAME(S)/INITIAL(S)	SUFFIX COUNTRY USA
DEBTOR'S NAME: Provide onl name will not fit in line 2b, leave all of 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME HOWARD C. MAILING ADDRESS PO Box 2 SECURED PARTY'S NAME 3a. ORGANIZATION'S NAME Craft3 3b. INDIVIDUAL'S SURNAME C. MAILING ADDRESS	of item 2 blank, check here and provide	The Individual Debtor information in its second of the In	ADDITIC John STATE WA cured Parly name (3a or 3)	POSTAL CODE 98237	SUFFIX COUNTRY USA
DEBTOR'S NAME: Provide onl name will not fit in line 2b, leave all value of the control of the c	fitem 2 blank, check here and provided and p	FIRST PERSONAL NAME Joshua CITY Concrete CURED PARTY): Provide only one Se FIRST PERSONAL NAME CITY Astoria Highway, Sedro Woolley, Walter of the Information in its content of	ADDITIC John STATE WA cured Parly name (3a or 3i ADDITIC STATE OR	POSTAL CODE	CC1Ad) SUFFIX COUNTRY USA SUFFIX COUNTRY
DEBTOR'S NAME: Provide onl name will not fit in line 2b, leave all of 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME Howard c. MAILING ADDRESS PO Box 2 SECURED PARTY'S NAME 3a. ORGANIZATION'S NAME Craft3 3b. INDIVIDUAL'S SURNAME c. MAILING ADDRESS 42 7th Street, Suite 100 COLLATERAL: This financing state of the suite o	terment covers the following collateral: acement at 33664 South Skagit is 8, 9, and 10 of Section 22, Tot 5-6E-22	FIRST PERSONAL NAME Joshua CITY Concrete CURED PARTY): Provide only one Se FIRST PERSONAL NAME CITY Astoria Highway, Sedro Woolley, Walter of the Information in its content of	ADDITIC John STATE WA cured Parly name (3a or 3i ADDITIC STATE OR	POSTAL CODE	SUFFIX COUNTRY USA SUFFIX COUNTRY
DEBTOR'S NAME: Provide onliname will not fit in line 2b, leave all vice and the provide onliname will not fit in line 2b, leave all vice and vice and vice and vice all vice and vice and vice all vice and vice and vice and vice all vice and vice a	tement covers the following collateral: acement at 33664 South Skagit ts 8, 9, and 10 of Section 22, Tot 5-6E-22 age 3.	FIRST PERSONAL NAME Joshua CITY Concrete CURED PARTY: Provide only one Se FIRST PERSONAL NAME CITY Astoria Highway, Sedro Woolley, W. wnship 35 North, Range 6 Ea	ADDITIC John STATE WA cured Parly name (3a or 3) ADDITIC STATE OR A 98284 ast W.M., Skagit Cou	POSTAL CODE 98237 POSTAL CODE 98210 POSTAL CODE 98210 POSTAL CODE 97103	SUFFIX COUNTRY USA SUFFIX COUNTRY USA
DEBTOR'S NAME: Provide onliname will not fit in line 2b, leave all of 2a. ORGANIZATION'S NAME 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME HOWARD c. MAILING ADDRESS PO Box 2 SECURED PARTY'S NAME 3a. ORGANIZATION'S NAME Craft3 3b. INDIVIDUAL'S SURNAME c. MAILING ADDRESS 42 7th Street, Suite 100 COLLATERAL: This financing states a companion of government Lower parcel Number: P41845 Township-Range-Section: 3 Full Legal Description on Parcel Number: P41845 Full Legal Description on Parcel Number: P41845	tement covers the following collateral: acement at 33664 South Skagit is 8, 9, and 10 of Section 22, Tot- 5-6E-22 age 3.	FIRST PERSONAL NAME Joshua CITY Concrete CURED PARTY): Provide only one Se FIRST PERSONAL NAME CITY Astoria Highway, Sedro Woolley, Walter of the Information in its content of	ADDITIC John STATE WA cured Parly name (3a or 3) ADDITIC STATE OR A 98284 ast W.M., Skagit Cou	POSTAL CODE	SUFFIX COUNTRY USA SUFFIX COUNTRY USA
name will not fit in line 2b, leave all of 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME Howard c. MAILING ADDRESS PO Box 2 3a. ORGANIZATION'S NAME Craft3 3b. INDIVIDUAL'S SURNAME Craft3 C. MAILING ADDRESS 42 7th Street, Suite 100 COLLATERAL: This financing states and the service of the servi	tement covers the following collateral: acement at 33664 South Skagit is 8, 9, and 10 of Section 22, Tot- 5-6E-22 age 3.	FIRST PERSONAL NAME Joshua CITY Concrete CURED PARTY: Provide only one Se FIRST PERSONAL NAME CITY Astoria Highway, Sedro Woolley, W. wnship 35 North, Range 6 Ea	ADDITIC John STATE WA cured Parly name (3a or 3) ADDITIC STATE OR A 98284 ast W.M., Skagit Cou	POSTAL CODE 98237 POSTAL CODE 98237 POSTAL CODE 97103 POSTAL CODE 97103	SUFFIX COUNTRY USA SUFFIX COUNTRY USA

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 Deblor name did not fit, check here 9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME Howard FIRST PERSONAL NAME Danielle ADDITIONAL NAME(S)/INITIAL(S) Louise 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 10b. INDIVIDUAL'S SURNAME Howard INDIVIDUAL'S FIRST PERSONAL NAME Danielle INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS POSTAL CODE COUNTRY STATE CITY PO Box 2 98237 Concrete WA 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) 11c. MAILING ADDRESS POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. X 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 15. Name and address of a RECORD OWNER of real estate described in item 16 Description of real estate: (if Debtor does not have a record interest) Exhibit A.

17. MISCELLANEOUS:

Joshua Howard

Exhibit A

Parcel A:

That portion of the Northeast ¼ of the Southeast ¼ (also called Government Lot 10) of Section 22, Township 35 North, Range 6, East W.M. lying North of the Northerly edge of a logging road which is defined as a line running approximately as follows:

Begin at a point 2,640 feet South of the Section corner common to Sections 14, 15, 22, and 23, Township 35 North, Range 6, East, W.M., which point is the approximate Northeast corner of the said Northeast ¼ of the Southeast ¼ and running thence South 47° West 263.6 feet; thence South 61° west 1,071.3 feet; thence South 57° West 226.9 feet to a point which is approximately 857.6 feet South of the approximate Northwest corner of the said Northeast ¼ of the Southeast ¼.

Situate in the County of Skagit, State of Washington.

Parcel B

All Government Lot 9 and that portion of Government Lot 8, lying Northerly of the County road, all in Section 22, Township 35 North, Range 6 East, W.M.

ALSO that part of Government Lot 4 of Section 23, Township 35 North, Range 6 East, W.M., lying North of the County road.

EXCEPT that portion of Government Lot 8, Section 22, Township 35 North, Range 6 East, W.M., lying Northerly of the mean high water mark on the North bank of the Skagit River, but subject to the rules of accretion, erosion, avulsion, and reliction that may hereafter affect the property and the location of the Skagit River.

Situate in the County of Skagit, State of Washington.

Parcel C:

That portion of Government Lot 8, Section 22, Township 35 North, Range 6 East, W.M., lying Northerly of the existing United States Forest Service Road known as the Cumberland Creek Road and Southerly of the existing County Road.

Situate in the County of Skagit, State of Washington.

Parcel Number: P41845