Sign Enve	elope ID: 38E474BC-73I	E4-4F8B-92E9-D1915596	6F193	202004130062 04/13/2020 01:13 PM Pages: 1 of 2 Fees: \$104 Skagit County Auditor, WA			
7							
	INANCING STAT	rement					
A. NAME	& PHONE OF CONTACT	AT FILER (optional)					
B. E-MAIL	L CONTACT AT FILER (op	tional)	_				
C CEND	ACKNOWLEDGMENT TO	): (Name and Address)					
C. SEND	ACKNOWLEDGINENT	7. (Name and Address)	$\neg$ l				
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			<b>-</b>	THE ABOVE SPA	ACE IS FO	OR FILING OFFICE USE	ONLY
name wil			e exact, full name; do not omit, modify and provide the Individual Debtor infon				
1b. IND	DIVIDUAL'S SURNAME		FIRST PERSONAL NAM	E ADDITIONAL NAME(S)/INITIAL(S)  Scott		SUFFIX	
c. MAILING	G ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
18818 F	isherman's Loop		Burlington		WA	98233	USA
name wil	RGANIZATION'S NAME		e exact, full name; do not omit, modify and provide the Individual Debtor infor	mation in item 10 of the F	Financing St	atement Addendum (Form U	
2a. OR 2b. IND	RGANIZATION'S NAME  DIVIDUAL'S SURNAME  d		FIRST PERSONAL NAM	mation in item 10 of the F	ADDITIC	alement Addendum (Form U  DNAL NAME(S)/INITIAL(S)	SUFFIX
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## **UCC FINANCING STATEMENT ADDENDUM**

NAME OF FIRST DEBTOR: Same as line 1a or 1b on Fir				
because Individual Deblor name did not fit, check here	nancing Statement; if line 1b was left blank			
9a. ORGANIZATION'S NAME				
R 9b. INDIVIDUAL'S SURNAME				
Reed				
FIRST PERSONAL NAME				
Gano				
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
Scott			S FOR FILING OFFIC	
DEBTOR'S NAME: Provide (10a or 10b) only one addit		or 2b of the Financing 5	Statement (Form UCC1) (	use exact, full name
do not omit, modify, or abbreviate any part of the Debtor's no 10a. ORGANIZATION'S NAME	ame) and enter the mailing address in line 10c			
TOB. ORGANIZATION'S NAME				
10b. INDIVIDUAL'S SURNAME				
Reed				
INDIVIDUAL'S FIRST PERSONAL NAME				
Judy				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  M.				SUFFIX
: MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
18818 Fisherman's Loop	Burlington	WA	98233	COUNTRY
. ADDITIONAL SECURED PARTY'S NAME ou	ASSIGNOR SECURED PARTY'S NAM	C. B. M. M. M.		•
11a. ORGANIZATION'S NAME		<del></del>		
A STATE INDIVIDUALIO OLIDINAME	FIRST PERSONAL NAME	LADDITIO	NAL NAME(S)/INITIAL(S	SUFFIX
11b. INDIVIDUAL'S SURNAME	FIRST FERSONAL NAME			I JOURFIA
11b. INDIVIDUAL'S SURNAME	FIRST FERSUNAL NAME	7.55.		JOPPIX
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MAILING ADDRESS  ADDITIONAL SPACE FOR ITEM 4 (Collateral):  X This FINANCING STATEMENT is to be filed (for record) REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate des	(or recorded) in the	STATE	POSTAL CODE	COUNTRY s a fixture filing
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MAILING ADDRESS      ADDITIONAL SPACE FOR ITEM 4 (Collateral):      X This FINANCING STATEMENT is to be filed (for record) REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate des	cribed in item 16  (or recorded) in the 14. This FINANCING STATEMENT:  cribed in item 16  16. Description of real estate.  A PARCEL OF LAND LOCA SKAGIT, WITH A SITU BURLINGTON, WA 9823 SCOTT/REED JUDY M HA BEING THE SAME PROPE RIDGEWOOD 70X14 VIN#	covers as-extracted of ATED IN THE STA IS ADDRESS CO. CURREN VING A TAX ASSERTY MORE FULLS 09L18147; SAM	POSTAL CODE    POSTAL CODE	s a fixture filing  DN, COUNTY C READ GAN  OF P68739 AN  S INC M/H 19
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