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Skagit County Auditor, WA

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A. NAME & PHONE OF CONTACT AT FILER (optional)				
B. E-MAIL CONTACT AT FILER (optional)				
C. SEND ACKNOWLEDGMENT TO: (Name and Address	ess)			
Craft3				
42 7th Street, Suite 100				
Astoria, OR 97103				
	1			
		THE ABOVE SPACE IS FO		
 DEBTOR'S NAME: Provide only one Debtor name (1a or name will not fit in line 1b, leave all of item 1 blank, check he 				
1a. ORGANIZATION'S NAME	and provide the individual bestor inton	nation in tent to or the Financing or	aternent Addendant (Form OC	ACTAU)
Tal Grid Willer				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	E ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
Malm	Ashley	Rose	Christina	
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTR
113 S Gardner Rd	Burlington	WA	98233	USA
DEBTOR'S NAME: Provide only one Debtor name (2a o				
name will not fit in line 2b, leave all of item 2 blank, check he [2a. ORGANIZATION'S NAME]	re and provide the individual Debtor inform	nation in item 10 of the Financing Si	alement Addendum (Form UC	JC (Ad)
28. ORGANIZATION S NAME				
R 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	E ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Malm	Christopher	Alber	<u> </u>	
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTR
113 S Gardner Rd	Burlington	WA	98233	USA
. SECURED PARTY'S NAME (or NAME of ASSIGNEE	of ASSIGNOR SECURED PARTY): Provide on	ly one Secured Party name (3a or 3	o)	
3a. ORGANIZATION'S NAME Craft3				
3a. ORGANIZATION'S NAME	FIRST PERSONAL NAM	E ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
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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 9b. INDIVIDUAL'S SURNAME Malm FIRST PERSONAL NAME Ashley ADDITIONAL NAME(S)/INITIAL(S) **Rose Christina** 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 INDIVIDUAL'S FIRST PERSONAL NAME Martin INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Winfield POSTAL CODE 10c. MAILING ADDRESS COUNTRY CITY STATE 6701 Ruby St NE 87109 USA Albuquerque NM 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 X 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. That portion of Tract 38, "PLAT OF THE BURLINGTON ACREAGE (if Debtor does not have a record interest) PROPERTY", as per plat recorded in Vol. 1 of Plats, page 49, records of Skagit County, Washington, described as follows: Beginning at a point on the West line of the County Road which is along the East line of said tract which point is 100 ft South of the intersection of said West line of said County Road and the South line of Fairhaven Avenue; thence South 0°14′00" East along the West line of said County Road 120 ft; thence North 89°58′30" West parallel to the South line of said Fairhaven Avenue a distance of 115.52 ft; thence North 1°01 '00" West a distance of 120.02 ft; thence South 89°58'30" East a distance of 117.16 ft to the true point of beginning. Situate in the County of Skagit, State of Washington. APN: P62532. 17. MISCELLANEOUS: **Christopher Malm & Martin Fox**

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