

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Elderlife Financial Lending, LLC - 888-228-4500
B. E-MAIL CONTACT AT FILER (optional) uccfiling@elderlifefinancial.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) ELDERLIFE FINANCIAL LENDING, LLC ATTN: LEGAL DEPARTMENT 100 Bluegrass Commons Blvd, Bldg. 1, Ste. 120 HENDERSONVILLE, TN 37075

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME				
OR	1b. INDIVIDUAL'S SURNAME Keller	FIRST PERSONAL NAME Janet	ADDITIONAL NAME(S)/INITIAL(S) A	SUFFIX
1c. MAILING ADDRESS 8247 Cedar Grove Ave	CITY Concrete	STATE WA	POSTAL CODE 98237	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY USA

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 ELDERLIFE FINANCIAL LENDING, LLC				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 100 BLUEGRASS COMMONS BLVD, BLDG 1, STE 120	CITY HENDERSONVILLE	STATE TN	POSTAL CODE 37075	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

All Fixtures appurtenant to:

8247 Cedar Grove Ave

ConcreteWA98237

PARCEL ID: P64070

LEGAL DESCRIPTION:

A PARCEL OF LAND LOCATED IN THE STATE OF WASHINGTON, COUNTY OF SKAGIT, WITH A SITUS ADDRESS OF 8247 CEDAR GROVE AVE, CONCRETE, WA 98237-9596 CURRENTLY OWNED BY KELLER JANET A HAVING A TAX ASSESSOR NUMBER OF P64070 AND BEING THE SAME PROPERTY MORE FULLY DESCRIBED AS INCLUDING MANUFACTURED HOME 1990 MARLETTE 56X28 VIN# H004445AB; CEDARGROVE ON THE SKAGIT, LOT 10. DATED AND RECORDED .

Original Loan Amount: \$25,200.00

Pursuant to the Memorandum of Agreement dated 08/09/2022, whereby Janet Keller (borrower(s)) promise to pay the total sum due under the Promissory Note borrowers have with Elderlife Financial Lending, LLC with the proceeds of the sale or refinancing of the above referenced subject property.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and Instructions) ☐ being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: ☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility	6b. Check <u>only</u> if applicable and check <u>only</u> one box: ☐ Agricultural Lien ☐ Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA:	

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

OR 9b. INDIVIDUAL'S SURNAME

Keller

FIRST PERSONAL NAME

Janet

ADDITIONAL NAME(S)/INITIAL(S)

A

SUFFIX

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

OR 10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

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

CITY

STATE

POSTAL CODE

COUNTRY

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 (if Debtor does not have a record interest):

16. Description of real estate:

8247 Cedar Grove Ave

Concrete WA 98237

PARCEL ID: P64070

LEGAL DESCRIPTION:

A PARCEL OF LAND LOCATED IN THE STATE OF WASHINGTON, COUNTY OF SKAGIT, WITH A SITUS ADDRESS OF 8247 CEDAR GROVE AVE, CONCRETE, WA 98237-9596 CURRENTLY OWNED BY KELLER JANET A HAVING A TAX ASSESSOR NUMBER OF P64070 AND BEING THE SAME PROPERTY MORE FULLY DESCRIBED AS INCLUDING MANUFACTURED HOME 1990 MARLETTE 56X28 VIN# H004445AB; CEDARGROVE ON THE SKAGIT, LOT 10. DATED AND RECORDED .

17. MISCELLANEOUS: