## 202209300108

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Skagit County Auditor, WA

UCC FINANCING STATEMENT				
FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional) 877-505-5400				
B. E-MAIL CONTACT AT FILER (optional) recordings@gorequire.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
Require Real Estate Solutions, LL				
5029 Corporate Woods Drive, Su	•			
Virginia Beach, VA 23462	NC 220			
Vilginia Boacii, 17(20102	THE A POWER	DAGE IG FOR FILING	0.055105.1105.0	NII W
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use expenses to the control of the		of the Debtor's name); if		
	and provide the Individual Debtor information in item 10 of			
OR				
1b. INDIVIDUAL'S SURNAME GUZMAN	FIRST PERSONAL NAME JORGE	ADDITIONAL NAI	vie(s)/initial(s)	SUFFIX
1c. MAILING ADDRESS 6489 STATE ROUTE 9	CITY SEDRO WOOLLEY		OSTAL CODE 8284	COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use ex	xact full name; do not omit, modify, or abbreviate any part	of the Debtor's name); if	any part of the Indiv	<u> </u>
name will not fit in line 2b, leave all of item 2 blank, check here				
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAI	VIE(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE P	OSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME: (or NAME of TOTAL ASSIGNEE of A 3a. ORGANIZATION'S NAME	ASSIGNOR SECURED PARTY): Provide only one secur	red party name (3a or 3b)		
Puget Sound Cooperative Credit Union				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		
3c. MAILING ADDRESS	CITY	STATE POSTAL CODE COUNTRY		
11201 SE 8th Street, Suite 208	BELLEVUE		1-6420	USA
4. COLLATERAL: This financing statement covers the following colla	uteral:			
Fixtures and energy equipment, including b and after acquired equipment, installed at			d associated	equipment,
			-D 46 FOLLOW	. DECTURITION
THAT PORTION OF GOVERNMENT LOT 5, SECTION AT THE INTERSECTION OF THE SOUTH LINE OF S				
EAST ALONG THE SOUTH LINE OF SAID GOVERNME SAID HIGHWAY; THENCE SOUTH TO THE POINT OF		FEET; THENCE WE	ST TO THE EA	AST LINE OF
·	22321107			
Tax ID: P38524				
. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)		being administered by a Deceden't Personal Representative		
6a. Check only if applicable and check only one box:  Public-Finance Transaction  Manufactured-Home Transaction	6b. Check only if applicable and check only one box:  Agricultural Lien  Non-UCC Filing			
7. ALTERNATE DESIGNATION (if applicable): Lessee/Lesso	r Consignee/Consignor Seller/Buy			e/Licensor
8. OPTIONAL FILER REFERENCE DATA				