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11/18/2022 09:46 AM Pages: 1 of 3 Fees: \$205.50

Skagit County Auditor, WA

	ional) : 800-331-3282 Fax: 818-662-	1141			
E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com					
SEND ACKNOWLEDGMENT TO: (Name and A	^{ddress)} 46322 - SunTrust Bar	k			
Lien Solutions P.O. Box 29071	89970632	7			
Glendale, CA 91209-9071	WAWA FIXTURE				
File with: Skagit, W	_		BOVE SPACE IS FO	OR FILING OFFICE U	SE ONLY
DEBTOR'S NAME: Provide only one Debtor name ame will not fit in line 1b, leave all of item 1 blank, che 1a. ORGANIZATION'S NAME	ck here and provide the Individu	l Debtor information in item	10 of the Financing Sta	tement Addendum (Form	UCC1Ad)
1b. INDIVIDUAL'S SURNAME SANDERS	FIRST PE SHAV	RSONAL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
485 W GATEWAY HEIGHTS LOOP	SEDR	O WOOLLEY	WA	98284-6404	USA
2b. INDIVIDUAL'S SURNAME MAILING ADDRESS		FIRST PERSONAL NAME		ADDITIONAL NAME(S/MNITIAL(S) STATE POSTAL CODE	
SECURED PARTY'S NAME (or NAME of ASSIG	NEE of ASSIGNOR SECURED PAR	Y): Provide only one Secur	red Party name (3a or 3t	 o)	
3a. ORGANIZATION'S NAME SERVICE FINANCE COMPANY, LL	.c			•	
3b. INDIVIDUAL'S SURNAME	-	RSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTR
55 SOUTH FEDERAL HWY SUITE 200 COLLATERAL: This financing statement covers the foliation in the first statement of the foliation in the first statement of the	ollowing collateral:				
AC EQUIPMENT					
AC EQUI MENT					

5. 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 De	cedent's Personal Representative
6a. Check <u>only</u> if applicable and check <u>only</u> one box:		6b. Check only if applicable	e and check <u>only</u> one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a	Transmitting Utility	Agricultural Lien	Non-UCC Filling
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consigno	r Seller/Buye	er Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:			
89970632 3484833			
		B	Ab. Disa Balations B.O. Bar BOOTA



UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS

because Individual Debtor name did not fit, check here	ncing Statement; if line 1b was left blank				
96. ORGANIZATION'S NAME					
90. INDIVIDUAL'S SURNAME					
SANDERS FIRST PERSONAL NAME					
SHAWN	Lavano				
ADDITIONAL NAME(SYINITIAL(S)	SUFFI		SPACE	IS FOR FILING OFF	ICE USE ON
DEBTOR'S NAME: Provide (10a or 10b) only one addit			ancing S	tatement (Form UCC1) (us	e exact, full na
do not omit, modify, or abbreviate any part of the Debtor's na 10a. ORGANIZATION'S NAME	ame) and enter the mailing address in line 10	le .			
10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
: MAILING ADDRESS	ату		STATE	POSTAL CODE	COUNTRY
ADDITIONAL SECURED PARTY'S NAME OF 11a, ORGANIZATION'S NAME	ASSIGNOR SECURED PAR	TY'S NAME: Provide only	one nam	e (11a or 11b)	
The original traction of the last					
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	MĒ	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
TID. INDIVIDUALS SURVAINE	FIRST PERSONAL NA	ME	ADDITION	NAL NAME(S)INITIAL(S)	SUFFIX
c. MAILING ADDRESS		ME			
TID. INDIVIDUALS SURNAME		ME			
: MAILING ADDRESS		ME			
: MAILING ADDRESS		ME			
: MAILING ADDRESS		ME			
: MAILING ADDRESS		ME			
. MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for recor	city d) (or recorded) in the	S STATEMENT:	STATE	POSTAL CODE	COUNTRY
MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for recon	cITY d] (or recorded) in the 14. This FINANCING	S STATEMENT: er to be cut covers as-e	STATE	POSTAL CODE	COUNTRY
MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for recon REAL ESTATE RECORDS (if applicable)	d] (or recorded) in the 14. This FINANCING covers timbodescribed in item 16 16. Description of re Parcel ID:	S STATEMENT: er to be cut covers as-e	STATE	POSTAL CODE	COUNTRY
MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for recon REAL ESTATE RECORDS (if applicable)	d] (or recorded) in the 14. This FINANCING covers timbodescribed in item 16 16. Description of re	S STATEMENT: er to be cut covers as-e	STATE	POSTAL CODE	COUNTRY
MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for recon REAL ESTATE RECORDS (if applicable)	d] (or recorded) in the 14. This FINANCING covers timbodescribed in item 16 16. Description of re Parcel ID:	S STATEMENT: er to be cut covers as-e al estate:	STATE	POSTAL CODE	COUNTRY
EMAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for reconnected ESTATE RECORDS (if applicable))	d] (or recorded) in the described in item 16 described in item 16 Parcel ID: P131084	G STATEMENT: er to be cut	STATE	POSTAL CODE	COUNTRY
EMAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for reconnected ESTATE RECORDS (if applicable))	city d] (or recorded) in the 14. This FINANCING covers timbudescribed in item 16 16. Description of re Parcel ID: P131084 PARCEL#	G STATEMENT: er to be cut covers as-e al estate: P131084	xtracted	POSTAL CODE collateral is filed as	COUNTRY
: MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for recor	city d] (or recorded) in the 14. This FINANCING covers timbudescribed in item 16 16. Description of re Parcel ID: P131084 PARCEL#	G STATEMENT: er to be cut	xtracted	POSTAL CODE collateral is filed as	COUNTRY

Debtor: SANDERS, SHAWN

Exhibit for Real Estate

16. Description of real estate:Continued

LEGAL DESCRIPTION: LOT 39, SAUK MOUNTAIN

VIEW ESTATES NORTH SECTION 18 TOWNSHIP 35

RANGE 05

DEED # 201803160125 DATE 03/12/2018

