

RETURN DOCUMENT TO:

Adelstein Sharpe & Serka
 400 N. Commercial Street
 Bellingham, WA 98225

Real Estate Excise Tax
 Exempt
 Skagit County Treasurer
 By Kaylee Oudman
 Affidavit No. 20235827
 Date 03/16/2023

Use dark black ink and print legibly. Documents not legible will be rejected per RCW 65.04.045 & 65.04.047

DOCUMENT TITLE(S):

Quit Claim Deed

Rerecord to correct title of document
 from "Living Trust" to "Trust"
 Scrivener's error

AUDITOR FILE NUMBER & VOL. & PG. NUMBERS OF DOCUMENT(S) BEING ASSIGNED OR RELEASED:

200109040192

Additional reference numbers can be found on page _____ of document.

GRANTOR(S)

Saul M. Spiro (Deceased) and Carroll L. Meek (Deceased)

Additional grantor(s) can be found on page _____ of document.

GRANTEE(S):

Spiro Meek Trust
 Rena Ziegler, Trustee

Additional grantee(s) can be found on page _____ of document.

ABBREVIATED LEGAL DESCRIPTION: (Lot, block, plat name OR; qtr/qtr, section, township and range OR; unit, building and condo name.)

PTN LOT 2, SECTION 2, TOWNSHIP 34 NORTH, RANGE 1 EAST, W.M.

Additional legal(s) can be found on page _____ of document.

ASSESSOR'S 16-DIGIT GEO-PARCEL NUMBER:

P19554; P19555; P19556, and P19560

Additional numbers can be found on page _____ of document.

The Auditor/Recorder will rely on the information provided on this form. The responsibility for the accuracy of the indexing information is that of the document preparer.

This document is filed for record by Chicago Title Insurance Company as an accommodation only. This document has not been examined as to its execution or as to its affect upon title.

200109040192
Skagit County Auditor

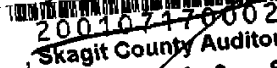
9/4/2001 Page 1 of 4 4:01:20PM

FILED FOR RECORD AT REQUEST OF:

Terrance M. Froese
 Attorney at Law
 913 Seventh Street
 P.O. Box 999
 Anacortes, Washington 98221

200108210108
Skagit County Auditor

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200107170002
Skagit County Auditor

7/17/2001 Page 1 of 3 8:49:05AM

4

MAIL TAX STATEMENTS TO:

NAME: SPIRO MEEK ~~LIVING~~ TRUST

ADDRESS: 3636 B Rosario Crest Lane
 Anacortes, WA 98221

LAND TITLE COMPANY OF SKAGIT COUNTY

Tax No.s P19556/34012200300007; P19560/34012200340003; P19554/34012200280001**
 Legals: Ptn Lot 2 22-34-1

SKAGIT COUNTY WASHINGTON

Real Estate Excise Tax

PAID

**P19555/34012200290000

QUIT CLAIM DEED

SEP 04 2001

THE GRANTORS, SAUL M. SPIRO and CARROLL L. MEEK, husband and wife, for and in consideration of ----- ONE DOLLAR (\$1.00) ----- convey and quit claim to SAUL M. SPIRO and CARROLL L. MEEK, TRUSTEES, or successor trustees, of the SPIRO MEEK LIVING TRUST, dated June 25, 2001, the following described real estate, situated in the County of Skagit, State of Washington, including any after acquired title:

See Exhibit "A" attached hereto. #42514

DATED: June 14, 2001.

SKAGIT COUNTY WASHINGTON

Real Estate Excise Tax

PAID

SKAGIT COUNTY WASHINGTON

Real Estate Excise Tax

AUG 21 2001

JUL 17 2001

Saul M. Spiro
 SAUL M. SPIRO

Amount Paid \$
 Skagit County Treasurer
 By: CE Deputy

Amount Paid \$
 Skagit Co. Treasurer
 By: CE Deputy

Carroll L. Meek
 CARROLL L. MEEK

A tract of land in Lot 2, Section 22, Township 34 North, Range 1 East, W.M. described as follows: A. Beginning at a point 1056 feet North and 565 feet West of the Southeast corner of said lot 2; thence West 144.5 feet; thence South 198 feet; thence East 74.5 feet; thence South 200 feet, more or less, to the beach; thence Easterly along the beach to a point South of beginning; thence North 425 feet; more or less, to place of beginning, LESS 16 foot road easement along the North line and a 16 foot easement along the West line, beginning at the Northwest corner of Tract and extending South 198 feet, B. Beginning at a point 1056 feet North and 495 feet West of the Southeast corner of said Lot 2; thence West 70 feet; thence south 425 feet more or less to the beach; thence Easterly along beach to point South of Place of beginning; thence North 429 feet to place of beginning, EXCEPT 16 foot road easement on North line.

AND

That portion of the following described tract lying Northerly of the center line of the most Northerly branch of a private road as it existed on June 15, 1971;

That portion of Government Lot 2, Section 22, Township 34 North, Range 1 East, W.M., described as follows:

Beginning at a point 1056 feet North of the Southwest corner of the Southeast quarter of the Northeast quarter of said Section 22; thence West 495 feet; thence North 132 feet; thence East 495 feet to the East line of said Lot 2; thence South 132 feet to the point of beginning, Together with an easement for ingress and egress on and across that certain private road as it existed on June 15, 1971, Use of that road shall require payment of a proportionate share from time to time of the expenses of the upkeep of such road.



200109040192

, Skagit County Auditor

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That portion of government lot 2, section 22, township 34 north, range 1 east, W.M., described as follows:

Beginning at a point 858 feet north and 635 feet west of the southeast corner of lot 2; thence west 74.5 feet to the southwest corner of the tract conveyed to Alice Kellogg Denny by deed dated February 23, 1934 and recorded February 28, 1934, in volume 164 of deeds, page 36; thence north 92.85 feet; thence south 65 degrees 42' west to the beach; thence easterly along the beach line to a point south of the point of beginning; thence north 220 feet, more or less, to the point of beginning.

Situate in the County of Skagit, State of Washington.



200109040192

, Skagit County Auditor

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STATE OF WASHINGTON)

)ss

County of Skagit)

On this day personally appeared before me SAUL M. SPIRO and CARROLL L. MEEK, husband and wife, to me known to be the principals described in and who executed the foregoing instrument, and acknowledged to me that said principals signed and sealed the same as said principals' free and voluntary act and deed, as Grantors and as Trustees, for the uses and purposes therein mentioned.

Subscribed and sworn to before me this 16 day of July, 2001.



Lisa J. Richards
~~XXXXXXXXXX~~ Lisa J. Richards
NOTARY PUBLIC in and for the
State of Washington, residing at ~~XXXXXXXXXX~~ Mount Vernon
My Commission expires: ~~XXXXXXXXXX~~ July 9, 2004



STATE OF WASHINGTON }
COUNTY OF WHATCOM } ss.

RENA ZIEGLER, Trustee of the Spiro Meek Trust, being first duly sworn on oath,
does hereby depose and state:

1. Following the deaths of the grantors and original trustees of the Spiro Meek Trust, Carol L Meek, date of death, October 12, 2017, and Saul M. Spiro, date of death June 23, 2021, I was appointed the successor trustee of the Spiro Meek Trust. Attached hereto and incorporated herein as **Exhibit A** is a true and correct copy of the certification of trust. Attached hereto and incorporated herein as **Exhibit B** are true and correct copies of the death certificates for Saul M. Spiro and Carroll L. Meek.

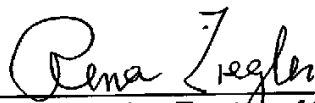
2. On September 4, 2001, Saul M. Spiro and Carol L. Meek quitclaimed their four Fidalgo Island tax parcels into the "Spiro Meek Living Trust."

3. The September 4, 2001 deed contains an incorrect name for the grantee – trust as a result of scrivener's error.

4. The correct name for the trust is the Spiro Meek Trust.

5. I am re-recording the quit claim deed for the sole purpose of correcting a scrivener's error and clarifying that the correct grantee on the quit claim deed is the Spiro Meek Trust.

DATED this 10th day of March, 2023.


Rena Ziegler, Trustee of the Spiro Meek Trust

STATE OF WASHINGTON }
COUNTY OF WHATCOM } ss.

I certify that I know or have satisfactory evidence that **Rena Ziegler**, Trustee of the Spiro Meek Trust, is the person who appeared before me, and said person acknowledged that she signed this instrument, on oath stated that she was authorized to execute the instrument and acknowledged it as the Trustee of the Spiro Meek Trust, to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated: 3-10-2023



Marissa McCauley
NOTARY PUBLIC, in and for the State of
Washington, residing at: Overson
Printed Name: Marissa McCauley
My Commission expires: 2-12-24

CERTIFICATE OF TRUST

STATE OF WASHINGTON)
) SS:
COUNTY OF SKAGIT)

The undersigned Grantor hereby certifies the following:

1. This Certificate of Trust relates to the **Spiro Meek Trust**, dated June ^{25th}, 2001 (the "Trust") created by trust agreement (the "Trust Agreement") executed by **SAUL M. SPIRO and CARROLL L. MEEK**.
2. The name of the Grantors are: **SAUL M. SPIRO and CARROLL L. MEEK**.
3. The name of the original trustees: **SAUL M. SPIRO and/or CARROLL L. MEEK**.
4. The name of each trustee appointed to act under the Trust Agreement at the time of the execution of this Certificate of Trust is:

Primary: **SAUL M. SPIRO and/or CARROLL L. MEEK**

First Successor: **RENA M. ZIEGLER**

5. The Trustee(s) are authorized by the Trust Agreement to sell, convey, pledge, mortgage, lease, manage, operate, control, transfer title, divide, convert or allot the trust property, including real and personal property, and to sell upon deferred payments, except that the property on Exhibit "A" attached hereto shall not be sold except as specifically authorized in the Trust Agreement.

6. The Trust Agreement has not been revoked.

7. The undersigned hereby represent that the statements contained in this Certificate of Trust are true and correct. This trust is signed by all currently acting trustees of the trust.


SAUL M. SPIRO


CARROLL L. MEEK

EXHIBIT **A**

ORIGINAL

Subscribed and sworn to before me this 25 day of June, 2001.

Terrance M. Froese

Terrance M. Froese, Washington
Notary Public, Anacortes,
Washington.

My commission expires: 7-19-01

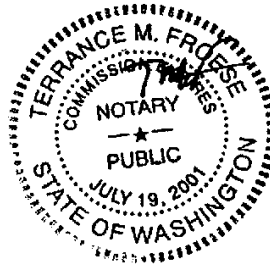


EXHIBIT A

Sm Co
Sm

Exhibit A

Skagit County, Washington Properties:

340122-0-030-0007 (P 19556)
340122-0-034-0003 (P 19560)
340122-0-034-028-0001 (P 19554)
340122-0-029-000 (P 19555)

EXHIBIT A

Sms Gm

STATE OF WASHINGTON DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2017-045510

DATE ISSUED: 10/24/2017

FEE NUMBER: 311017

FIRST AND MIDDLE NAME(S): CARROLL K.
LAST NAME(S): WEEK

COUNTY OF DEATH: SKAGIT

DATE OF DEATH: OCTOBER 12, 2017

HOUR OF DEATH: 01:45 AM

SEX: FEMALE

AGE: 75 YEARS

SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO

RACE: WHITE

BIRTH DATE: [REDACTED]

BIRTH PLACE: WHITEHALL, MT

MARITAL STATUS: MARRIED

SPOUSE: SAUL M SPIRO

OCCUPATION: PSYCHOLOGIST

INDUSTRY: MEDICAL

EDUCATION: DOCTORATE OR PROFESSIONAL DEGREE

US ARMED FORCES: NO

INFORMANT: RENA ZIEGLER

RELATIONSHIP: SISTER-IN-LAW

ADDRESS: 3122 YORK ST., BELLINGHAM, WA 98229

CAUSE OF DEATH:

A: MALNUTRITION AND CACHEXIA

INTERVAL: ONE YEAR

B: FAILURE TO THRIVE

INTERVAL: TWO YEARS

C: DEPRESSION

INTERVAL: TWO YEARS

D:

INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: EMPHYSEMA

DATE OF INJURY:

HOUR OF INJURY:

INJURY AT WORK:

PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP:

COUNTY:

DESCRIBE HOW INJURY OCCURRED:

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: OTHER PLACE

FACILITY OR ADDRESS: GREEN CLIFF LODGE

CITY, STATE, ZIP: ANACORTES, WASHINGTON 98221

RESIDENCE STREET: 3838 ROSARIO

CITY, STATE, ZIP: ANACORTES, WA 98221

INSIDE CITY LIMITS: YES

COUNTY: SKAGIT

TRIBAL RESERVATION: NOT APPLICABLE

LENGTH OF TIME AT RESIDENCE: 20 YEARS

FATHER/PARENT: LELAND CARROLL LARSON

MOTHER/PARENT: DORIS [REDACTED]

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: FIRST CREMATION SERVICES

CITY, STATE: KENT, WASHINGTON

DISPOSITION DATE: OCTOBER 24, 2017

FUNERAL FACILITY: SIMPLE CREMATION OF BELLINGHAM

ADDRESS: 1313 EAST MAPLE ST

CITY, STATE, ZIP: BELLINGHAM, WASHINGTON 98225

FUNERAL DIRECTOR: MICHAEL GALAVIZ

EXHIBIT B

MANNER OF DEATH: NATURAL

AUTOPSY: NO

WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE

CAUSE OF DEATH: NOT APPLICABLE

DID TOBACCO USE CONTRIBUTE TO DEATH: NO

PREGNANCY STATUS IF FEMALE: NO RESPONSE

CERTIFIER NAME: LESLIE A. ESTEP, MD

TITLE: PHYSICIAN

CERTIFIER ADDRESS: 227 FREEWAY DRIVE, SUITE A

CITY, STATE, ZIP: MOUNT VERNON, WA 98273

DATE SIGNED: OCTOBER 16, 2017

CASE REFERRED TO ME/CORONER: NO

FILE NUMBER: NOT APPLICABLE

ATTENDING PHYSICIAN: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: CHERYL PETERSON

DATE RECEIVED: OCTOBER 24, 2017

DOI 422-132 (4/10)

NOT VALID IF PHOTOCOPIED OR ALTERED



STATE OF WASHINGTON DEPARTMENT OF HEALTH



CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2021-030181

DATE ISSUED: 06/28/2021
FEE NUMBER: 37

FIRST AND MIDDLE NAME(S): SAUL MATTHEW
LAST NAME(S): SPIRO

COUNTY OF DEATH: SKAGIT
DATE OF DEATH: JUNE 23, 2021
HOUR OF DEATH: 02:24 PM
SEX: MALE AGE: 90 YEARS
SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO
RACE: WHITE

BIRTH DATE: [REDACTED]
BIRTH PLACE: BURLINGTON, VT

MARITAL STATUS: WIDOWED
SURVIVING SPOUSE: NOT APPLICABLE

OCCUPATION: PSYCHIATRIST
INDUSTRY: UNIVERSITY EDUCATION
EDUCATION: DOCTORATE OR PROFESSIONAL DEGREE
US ARMED FORCES: YES

INFORMANT: RENA ZIEGLER
RELATIONSHIP: SISTER
ADDRESS: 3822 YORK ST. BELLINGHAM WA 98229

CAUSE OF DEATH:
A: CEREBRAL VASCULAR ACCIDENT
INTERVAL: 4 MONTHS
B: ATHEROSCLEROTIC ARTERY DISEASE
INTERVAL: YEARS

C:
INTERVAL:

D:
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: VASCULAR DEMENTIA

DATE OF INJURY:
HOUR OF INJURY:
INJURY AT WORK:
PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP:
COUNTY:
DESCRIBE HOW INJURY OCCURRED:

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 3636 ROSARIO CREST LANE
CITY, STATE, ZIP: ANACORTES, WASHINGTON 98221

RESIDENCE STREET: 3636 ROSARIO CREST LANE
CITY, STATE, ZIP: ANACORTES, WA 98221
INSIDE CITY LIMITS: NO COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 60 YEARS

FATHER: SAUL S SPIRO
MOTHER: DOROTHY [REDACTED]

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: LICENSED DIRECTOR CREMATORIUM

CITY, STATE: BLAINE, WASHINGTON
DISPOSITION DATE: JUNE 29, 2021

FUNERAL FACILITY: WHATCOM CREMATION & FUNERAL

ADDRESS: 4202 GUIDE MERIDIAN #106
CITY, STATE, ZIP: BELLINGHAM, WASHINGTON 98226
FUNERAL DIRECTOR: TIM D. POWELL

EXHIBIT B

MANNER OF DEATH: NATURAL
AUTOPSY: NO
WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE
CAUSE OF DEATH: NOT APPLICABLE
DID TOBACCO USE CONTRIBUTE TO DEATH: NO
PREGNANCY STATUS IF FEMALE: NO RESPONSE

CERTIFIER NAME: ANITA M. MEYER, MD
TITLE: PHYSICIAN
CERTIFIER ADDRESS: 227 FREEWAY DRIVE, SUITE A
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98273
DATE SIGNED: JUNE 25, 2021

CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: NOT APPLICABLE
ATTENDING PHYSICIAN: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: MARIA VIVANCO
DATE RECEIVED: JUNE 25, 2021