Skagit County Auditor, WA

AFTER RECORDING RETURN TO:

LIEN RESEARCH CORP. P.O. BOX 3409 ARLINGTON, WA 98223

CLAIM OF LIEN

LAKESIDE INDUSTRIES, INC. Claimant

VS

R AND J DIRTWORKS, INC.

Name of person indebted to Claimant

NOTICE IS HEREBY GIVEN that the person below claims a lien pursuant to chapter 60.04 RCW. In support of this lien, the following information is submitted:

Name of Claimant:

LAKESIDE INDUSTRIES, INC.

Telephone Number:

(425) 313-2612

Address:

PO BOX 7016, ISSAQUAH, WA 98027

- Date on which the claimant began to perform labor, provide professional services, supply material or equipment or the date on which employee benefit contributions became due: March 15, 2023
- Name of the person indebted to the Claimant: R AND J DIRTWORKS, INC., PO BOX 1758, MOUNT VERNON, WA 98273
- 4. Description of the property against which a lien is claimed:

Address: HIGH POINT ESTATES, E DIVISION ST & N 53RD ST, MOUNT VERNON, WA Legal Description:

P126391: THE SOUTH HALF OF THE SOUTHEAST QUARTER OF THE NORTHEAST QUARTER OF SECTION 22, TOWNSHIP 34 NORTH, RANGE 4 EAST, W.M., EXCEPT THE WEST 638.12 FEET (AS MEASURED PERPENDICULAR TO THE WEST LINE); EXCEPT THE MOUNT VERNON-BIG LAKE COUNTY ROAD RUNNING ALONG THE SOUTH LINE THEREOF, AND ALSO EXCEPT THE EAST 150 FEET OF THE SOUTH 300 FEET OF THE REMAINDER.

P27513: THE EAST 393.93 FEET (AS MEASURED PERPENDICULAR TO AND PARALLEL WITH THE EAST LINE) OF THE NORTH HALF OF THE SOUTHEAST QUARTER OF THE NORTHEAST QUARTER OF SECTION 22, TOWNSHIP 34 NORTH, RANGE 4 EAST, W.M., SITUATE IN THE CITY OF MOUNT VERNON, COUNTY OF SKAGIT, STATE OF WASHINGTON

SKAGIT County Assessor's Tax Parcel No. P126391 & P27513

- Name of owner(s) or reputed owner(s) (if not known, state "unknown"): SITA ENTERPRISES, LLC, PO BOX 1192, SUMAS, WA 98295 & 5201 E DIVISION ST, MOUNT VERNON, WA 98274 SITA ENTERPRISES, LLC C/O MARK LACKEY, 900 DUPONT ST, BELLINGHAM, WA 98225 GB EMERALD, LLC, PO BOX 1192, SUMAS, WA 98295 & 5201 E DIVISION ST, MOUNT VERNON, WA 98273 GB EMERALD, LLC C/O MARK LACKEY, 900 DUPONT ST, BELLINGHAM, WA 98225
- The last date on which labor was performed; professional services were furnished; contributions to an employee benefit plan were due; or material or equipment was furnished: March 27, 2023
- Principal amount for which the lien is claimed: \$373,901.39, plus applicable lien fees &/or attorney's fees &/or interest.
- 8. If the Claimant is the assignee of this claim so state here: N/A.

Lien Research Corp. By:	Valed Olhir	
It's Authorized Representative/ As Authorized agent of LAKESI PO BOX 7016	mployee, DE INDUSTRIES, INC., Claimant	
ISSAQUAH, WA 98027 (425) 313-2612		
STATE OF WASHINGTON))ss	
COUNTY OF SNOHOMISH	j	
the claimant (or attorney of the employee benefit plan) above n believe the same to be true and	worn, says: I am an authorized reproclaimant, or administrator, represents amed. I have read the forgoing claim correct and that the claim of lien is rearly excessive under penalty of perj	ative, or agent for the trustee of an n, know the contents thereof, and not frivolous and is made with
Subscribed and sworn to before	e me this 7 day of June 2023.	
PRINTED NAME: JENNIFER KAPLAN NOTARY PUBLIC, In and for the State of Washington.		
Residing in: LA		on.
	n expires: 2/24/2024	NOTARY PUBLIC STATE OF WASHINGTON
STATE OF WASHINGTON))ss	JENNIFER KAPLAN
COUNTY OF SNOHOMISH)	License Number 20121937 My Commission Expires 02-24-2024

On this 7 day of June 2023, before me personally appeared JUDY SARKIS, to me known to be the (president, vice president, secretary, treasurer, or other authorized office or agent, as the case may be) of Lien Research Corp., A Washington corporation, that executed the within and foregoing instrument, and acknowledged said instrument to be the free and voluntary act of deed of said corporation, for the uses and purposes therein mentioned, and on oath stated that he/she was authorized to execute said instrument and that the seal affixed is the corporate seal of said corporation.

In Witness Whereof, I have hereunto set my hand and affixed my official seal the day and hear first above written.

PRINTED NAME: JENNIFER KAPLAN

NOTARY PUBLIC, In and for the State of Washington.

Residing in: LAKE STEVENS My commission expires: 2/24/2024

Order # 23-060089, Dated 6/2/2023

NOTARY PUBLIC
STATE OF WASHINGTON
JENNIFER KAPLAN
License Number 20121937
My Commission Expires 02-24-2024