## 202307260030

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Skagit County Auditor, WA

UCC FINANCING STATEMENT							
877-505-5400							
B E-MAIL CONTACT AT FILER (optional) recordings@gorequire.com							
C. SEND ACKNOWLEDGMENT TO: (Name and Address)  Require Real Estate Solutions, LLC P.O. Box 860 Palm Harbor, FL 34682	٦						
		THE ABOVE SPA	ACE IS FOI	R FILING OF	FICE USE O	NLY	
DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use exact full in name will not fit in line 1b, leave all of flem 1 blank, check here and provide 1a. ORGANIZATION'S NAME							
OR 1b. INDIVIDUAL'S SURNAME Oldenhof	FIRST PERSONAL NA	FIRST PERSONAL NAME Daniel			ADDITIONAL NAME(S)/INITIAL(S) SUFFI		
1c. MAILING ADDRESS 428 BARRY LOOP	CITY MOUNT VERNON		STATE WA	POSTA 98274	L CODE	COUNTRY	
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact full in name will not fit in line 2b, leave all of item 2 blank, check here and provide 2a. ORGANIZATION'S NAME							
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	
2c. MAILING ADDRESS	CITY		STATE	POSTA	L CODE	COUNTRY	
SECURED PARTY'S NAME: (or NAME of TOTAL ASSIGNEE of ASSIGNO     Sa. ORGANIZATION'S NAME     Puget Sound Cooperative Credit Union	OR SECURED PARTY): P	ovide only <u>one</u> secured	party name (	3a or 3b)			
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	FIRST PERSONAL NAME			ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		
3c.MAILING ADDRESS 11201 SE 8th Street, Suite 208	CITY BELLEVUE		STATE WA	POSTAL CODE 98004-6420		COUNTRY	
4. COLLATERAL: This financing statement covers the following collateral: For all other Energy-Smart loans it should read accessories, peripheral and associated equipmen VERNON, WA 98274  (0.1515 ac) LOT 69, DIGBY HEIGHTS PHASE II, ACC FILE NO. 201109190087, RECORDS OF SKAGIT COUNTY	t, and after acqu	uired equipment	, instal	led at	428 BARRY	Y LOOP MOUN	
Tax ID: P130952							
5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is	rust (see UCC1Ad, ilem 17	and Instaudions)	oing adminis	tered by a Dec	arlan's Percona	al Representative	
6a. Check only if applicable and check only one box:	Tax (see Oco IAu, Reill 17			if applicable a			
Public-Finance Transaction Manufactured-Home Transaction 7. ALTERNATE DESIGNATION (if applicable): Lessee/Lessor	A Debtor is a Trasmitting Utility  Consignee/Consignor Seller/Buyer			Agricultural Lien Non-UCC  Bailee/Bailor Licensee/L			
8. OPTIONAL FILER REFERENCE DATA 01denhof186							
EN INC OFFICE CORV. LICC FINANCING STATEMENT (FORM LICC	04) (D 04)00(44)						