## 202403040057

03/04/2024 12:29 PM Pages: 1 of 1 Fees: \$303.50

Skagit County Auditor, WA

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT SUBMITTER (options 877-505-5400	al)				
B. E-MAIL CONTACT AT SUBMITTER (optional) recordings@gorequire.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
C. SEND ACKNOWLEDGINENT TO. (Name and Address)	_				
reQuire Real Estate Solutions, LLC P.O. Box 860	I				
Palm Harbor, FL 34682					
	1	Pri	nt	Reset	
SEE BELOW FOR SECURED PARTY CONTAC	CT INFORMATION	\$200 minutes (1990)		FILING OFFICE USE	SSMIIII
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use not fit in line 1b, leave all of item 1 blank, check here	e exact, full name; do not omit, modify and provide the Individual Debtor in	or abbreviate any part of th	e Debtor's name); if a	ny part of the Individual D	
1a. ORGANIZATION'S NAME					
OR 1b. INDIVIDUAL'S SURNAME	FIRST DERSONAL	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
RUST	JULIA				
1c. MAILING ADDRESS 17847 NANNA LANE	CITY LA CONNER	CITY LA CONNER		POSTAL CODE 98257	COUNTRY
<ol> <li>DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use not fit in line 2b, leave all of item 2 blank, check here</li> <li>ORGANIZATION'S NAME</li> </ol>	e exact, full name; do not omit, modify, and provide the Individual Debtor in				ebtor's name will
28. ORGANIZATION S NAME					
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
2c. MAILING ADDRESS	СПУ		STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE OF ASSI 3a. ORGANIZATION'S NAME	IGNOR SECURED PARTY): Provide	only one Secured Party nar	me (3a or 3b)		
Puget Sound Cooperative Credit Union					
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
11201 SE 8th Street, Suite 208	BELLEVUE		WA	98004-6420	USA
4. COLLATERAL: This financing statement covers the following collate	eral:				
Fixtures and energy equipment, including after acquired equipment, installed at 178  Lot 35 of the Cobahud Waterfront Tracts, of Section 34, Township 34 North, Range 2 Eas	847 NANNA LANE La Conne recorded plat on file w	r, WA 98257. ith the Bureau o	f Indian Affa	irs, Government	Lot 4,
County, State of Washington.					
Parcel No.: S3402340038/ P129611					
Check only if applicable and check only one box: Collateral is	held in a Trust (see UCC1Ad, item 1)			by a Decedent's Personal blicable and check only or	
Check only if applicable and check only one box:      Public-Finance Transaction      Manufactured-Home T	ransaction	Fransmitting Utility	Agricultural		
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lesse		Seller/Buyer			nsee/Licensor
8. OPTIONAL FILER REFERENCE DATA: RUST314		3 Sellet/Duyer	Bailee	Licer	ELECTRO!
F <b>ILING OFFICE COPY —</b> UCC FINANCING STAT <b>EM</b> ENT	「(Form UCC1) (Rev. 07/01/23				