

UCC FINANCING STATEMENT

MARINI MANTALA PARTAMANIA PUNTANIA MARININA MARININA PARTAMANIA MARININA MARININA MARININA MARININA MARININA M 201907190094

07/19/2019 02:06 PM Pages: 1 of 3 Fees: \$103.50

A. NAME & PHONE OF CONTACT AT FILER (op Phone: (800) 331-3282 Fax: (818) 662-					
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS Glendale Customer Servi					
C. SEND ACKNOWLEDGMENT TO: (Name and		\dashv			
Lian Calutions		\neg I			
Lien Solutions P.O. Box 29071	70838279	11			
Glendale, CA 91209-9071	WAWA				
	FIXTURE	.			
File with: Skagit, V				OR FILING OFFICE US	
 DEBTOR'S NAME: Provide only one Debtor nar name will not fit in line 1b, leave all of item 1 blank, cl 		o not omit, modify, or abbreviate a dual Debtor information in item 10			
1a. ORGANIZATION'S NAME	leck liefe	Tual Debitor information in term 10	of the Financing St	mement Addendam (i oim c	- COIAG
WESTERN VALLEY FARMS L.L.C	;, ·				
OR 15. INDIVIDUAL'S SURNAME	FIRST	PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
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1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
20616 BULSON ROAD	MOI	MOUNT VERNON		98274	USA
2. DEBTOR'S NAME: Provide only one Debtor nar	me (2a or 2b) (use exact, full name; de	not omit, modify, or abbreviate a	any part of the Debtor	's name); if any part of the	ndividual Debtor's
name will not fit in line 2b, leave all of item 2 blank, ch	heck here and provide the Indivi	dual Debtor information in item 10	of the Financing Sta	tement Addendum (Form U	ICC1Ad)
2a. ORGANIZATION'S NAME	DEDITIES III.C				
WESTERN VALLEY FARMS PRO					SUFFIX
2b. INDIVIDUAL'S SURNAME	FIRST	PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
20616 BULSON ROAD		JNT VERNON	WA	98274	USA
3. SECURED PARTY'S NAME (or NAME of ASS 3a. ORGANIZATION'S NAME	IGNEE of ASSIGNOR SECURED PA	RTY): Provide only one Secured	Party name (3a or 3	o)	
Financial Pacific Leasing, Inc.					
OR 3b. INDIVIDUAL'S SURNAME	FIRST	PERSONAL NAME	ADDITIO	NAL NAME(S)INITIAL(S)	SUFFIX
				,, ,,	
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
		SEDAL MAN		98001	USA
P.O. Boy 4568	l FET		Ι \Λ/Δ		
P.O. Box 4568 4. COLLATERAL: This financing statement covers the		DERAL WAY	WA	1 30001	J 05A
4. COLLATERAL: This financing statement covers the APN: P16739	e following collateral:			•	
4. COLLATERAL: This financing statement covers the APN: P16739 Abbreviated Legal Description:OPEN SPAC	e following collateral: CE #439 #761722 1973 DT 17	DK 3 THE N 20 RODS OF	THE N1/2 O/T	HE SW1/4 AND THE	S 60 RODS
4. COLLATERAL: This financing statement covers the APN: P16739 Abbreviated Legal Description:OPEN SPAC O/THE N1/2 O/THE SW1/4. EXCEPT THE I	e following collateral: CE #439 #761722 1973 DT 17	DK 3 THE N 20 RODS OF	THE N1/2 O/T	HE SW1/4 AND THE	S 60 RODS
P.O. Box 4568 4. COLLATERAL: This financing statement covers the APN: P16739 Abbreviated Legal Description:OPEN SPAC O/THE N1/2 O/THE SW1/4. EXCEPT THE I FT OF THE S 476 FT O/THE N1/2 OF T	e following collateral: CE #439 #761722 1973 DT 17	DK 3 THE N 20 RODS OF	THE N1/2 O/T	HE SW1/4 AND THE	S 60 RODS
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WESTERN VALLEY FARMS L.L.C.

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ent; if line 1b was left blank			
SUFFIX			
	THE ABOVE SPACE	IS FOR FILING OFF	ICE USE ONL
name or Debtor name that did not fit in line 1			
r the mailing address in line 10c			
			SUFFIX
CITY	STATE	POSTAL CODE	COUNTRY
MOUNT VERNON	WA	98274	USA
SIGNOR SECURED PARTY'S NAME	: Provide only one nam	e (11a or 11b)	
			Lauren
FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
City	STATE	POSTAL CODE	COUNTRY
d) in the 114. This FINANCING STATEME	NT:		
		collatoral M is filed as	a fixture filing
	COVERS ASSEXUACTED	Collateral 23 is filed as	a lixture liming
Parcel ID:			
P16739			
1. 10700			
	19		
PARCEL #P1673	9		
PARCEL #P1673		1973 DT 17 D	K 3 THE
PARCEL #P1673	139 #761722 <i>1</i>		
PARCEL #P1673	139 #761722 ⁻ S OF THE N1/	2 OF THE SV	V1/4 ANI
	CITY MOUNT VERNON SIGNOR SECURED PARTY'S NAME FIRST PERSONAL NAME CITY CITY This FINANCING STATEMEN	THE ABOVE SPACE ame or Debtor name that did not fit in line 1b or 2b of the Financing S r the mailing address in line 10c CITY MOUNT VERNON SIGNOR SECURED PARTY'S NAME: Provide only one name FIRST PERSONAL NAME ADDITIO CITY STATE ADDITIO 14. This FINANCING STATEMENT: Covers timber to be cut Covers as-extracted	THE ABOVE SPACE IS FOR FILING OFF ame or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use the mailing address in line 10c CITY

Debtor: WESTERN VALLEY FARMS L.L.C.

Exhibit for Real Estate

16. Description of real estate:

Continued

EXCEPT THE NORTH 85 FEET OF THE SOUTH 1020.31 FEET OF THE WEST 260 FEET OF THE NW1/4 OF THE SW1/4; ALSO EXCEPT THE WEST 403 FEET OF THE SOUTH 476 FEET OF THE N1/2 OF THE SW1/4; EXCEPT ROADS, DITCHES AND RIGHT OF WAYS (P16730 COMBINED TO THIS ACCOUNT)