12/30/2022 02:36 PM Pages: 1 of 3 Fees: \$205.50

Skagit County Auditor, WA

| NAME & PHONE OF CONTACT AT FILER (o) ame: Wolters Kluwer Lien Solutions Phor | | | | |
|---|---|--|--|--------------------|
| E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com | | | | |
| SEND ACKNOWLEDGMENT TO: (Name and | Address) 46322 - SunTrust Bank | | | |
| Lien Solutions | 90646567 | | | |
| P.O. Box 29071 | | | | |
| Glendale, CA 91209-9071 | WAWA FIXTURE . | | | |
| | FIXTURE | | | |
| File with: Skagit, V | | THE ABOVE SPACE IS F | | |
| DEBTOR'S NAME: Provide only <u>one</u> Debtor nar ame will not fit in line 1b, leave all of item 1 blank, ct | <u> </u> | | | |
| 1a. ORGANIZATION'S NAME | and provide the maintaid. Bester | The state of the fundament of the fundam | esternesses adonadan (r onn | |
| | | | | |
| 1b. INDIVIDUAL'S SURNAME GRIMM | FIRST PERSONAL CHRISTOP | | DNAL NAME(S)/INITIAL(S) | SUFFIX |
| MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| 261 ARREZO DR | SEDRO WOO | | 98284 | USA |
| EBTOR'S NAME: Provide only one Debtor nar | | • | | |
| 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL | | ONAL NAME(S)/INITIAL(S) | SUFFIX |
| GRIMM | HEATHER | N | | |
| GRIMM MAILING ADDRESS | HEATHER | N STATE | POSTAL CODE | COUNTRY |
| GRIMM MAILING ADDRESS 261 ARREZO DR | HEATHER CITY SEDRO WOO | N STATE WA | POSTAL CODE 98284 | |
| GRIMM MAILING ADDRESS 261 ARREZO DR SECURED PARTY'S NAME (or NAME of ASS) 38. ORGANIZATION'S NAME | HEATHER CITY SEDRO WOO | N STATE WA | POSTAL CODE 98284 | COUNTRY |
| GRIMM MAILING ADDRESS 261 ARREZO DR SECURED PARTY'S NAME (OF NAME OF ASS 38. ORGANIZATION'S NAME SERVICE FINANCE COMPANY, L | HEATHER CITY SEDRO WOO | N STATE WA | POSTAL CODE 98284 | COUNTRY |
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| 5. Check <u>only</u> if applicable and check <u>only</u> | yone box: Collateral is | st (see UCC1Ad, item 17 and | Instructions) | being administered by a De | cedent's Personal Representati | ĺν |
|--|-------------------------------|-----------------------------|--|------------------------------|-------------------------------------|----|
| 6a. Check <u>only</u> if applicable and check <u>or</u> | nly one box: | | | 6b. Check only if applicable | e and check <u>only</u> one box: | _ |
| Public-Finance Transaction | Manufactured-Home Transaction | A Debtor is a Transm | itting Utility | Agricultural Lien | Non-UCC Filling | |
| 7. ALTERNATIVE DESIGNATION (if appl | icable): Lessee/Lessor | Consignee/Consignor | Seller/Buye | r 🔲 Bailee/Bailor | Licensee/Licensor | |
| 8. OPTIONAL FILER REFERENCE DATA | \ : | | | | | |
| 90646567 | 3439814 | | | | | 1 |
| | | | The state of the s | Propored | 1 by Lien Solutions, P.O. Boy 20071 | _ |



| □ D€ | ME OF FIRST DEBTOR: Same as line 1a or 1b on Financing | Statement; if line 1b was left blank | 1 | | | |
|---------------------|---|--|----------------------------------|-------------------|------------------------|----------------------|
| 1 | cause Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME | | 1 | | | |
| | | | | | | |
| | | | 7 | | | |
|)R | 9b. INDIVIDUAL'S SURNAME | | 4 | | | |
| | GRIMM | | | | | |
| | FIRST PERSONAL NAME | | 1 | | | |
| | CHRISTOPHER | | _ | | | |
| | ADDITIONAL NAME(SYINITIAL(S) B | SUFFIX | THE ABOVE | 00405 | IO FOR FILING OF | THE HEE ON |
| | EBTOR'S NAME: Provide (10a or 10b) only one additional | Dabter name or Dabter name that did not fit i | - | | IS FOR FILING OF | |
| | ont omit, modify, or abbreviate any part of the Debtor's name) | | n inte 10 or 20 or the Pina | ancing Si | atement (Form OCC1) | use exact, full flam |
| | 10a, ORGANIZATION'S NAME | | | | | |
| R | 10b. INDIVIDUAL'S SURNAME | | | | | |
| | IDD. INDIVIDUALS SURNAME | | | | | |
| | INDIVIDUAL'S FIRST PERSONAL NAME | _ | | | | |
| | | | | | | |
| | INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | | | | | SUFFIX |
| Dα | MAILING ADDRESS | ary | | STATE | POSTAL CODE | COUNTRY |
| | , | 5 | | 0,,,,,, | | |
| 1. | ADDITIONAL SECURED PARTY'S NAME OF | ASSIGNOR SECURED PARTY'S | NAME: Provide only o | ne nam | e (11a or 11b) | |
| | 44- ODG4:#747:0:#0 NAME | | | | · | |
| | 11a. ORGANIZATION'S NAME | | | | | |
| R | | EIDST DEDSONAL NAME | | ADDITIO | JAI NAME(CYNNITIAL(C) | SHEELY |
| Ā | 11b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
| | | FIRST PERSONAL NAME | | ADDITION STATE | VAL NAME(S)/INITIAL(S) | SUFFIX |
| | 11b. INDIVIDUAL'S SURNAME | | | | | |
| | 11b. INDIVIDUAL'S SURNAME | | | | | |
| 11c. | 11b, INDIVIDUAL'S SURNAME MAILING ADDRESS | | | | | |
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| 11c. | 11b, INDIVIDUAL'S SURNAME MAILING ADDRESS | | | | | |
| 11c. | 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS DDITIONAL SPACE FOR ITEM 4 (Collateral): | CITY | | | | |
| 111c. | 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS DDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or | recorded) in the 14. This FINANCING STA | TEMENT: | STATE | POSTAL CODE | COUNTRY |
| 11c. 2. <i>F</i> | This FINANCING STATEMENT is to be filed [for record] (or REAL ESTATE RECORDS (if applicable) | recorded) in the 14. This FINANCING STA | TEMENT: e cut □ covers as-ex | STATE | | COUNTRY |
| 3. 2 5. N | 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS DDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or | crecorded) in the 14. This FINANCING STA covers timber to but the covers timber the covers timber to but the covers timber timber timber timber ti | TEMENT: e cut □ covers as-ex | STATE | POSTAL CODE | COUNTRY |
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| 11c. 2. <i>F</i> | MAILING ADDRESS DDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or REAL ESTATE RECORDS (if applicable) ame and address of a RECORD OWNER of real estate descr | recorded) in the 14. This FINANCING STA covers timber to build in item 16 16. Description of real estribution in the 17 parcel ID: | TEMENT: e cut □ covers as-ex | STATE | POSTAL CODE | COUNTRY |
| 11c. 2. <i>A</i> | MAILING ADDRESS DDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or REAL ESTATE RECORDS (if applicable) ame and address of a RECORD OWNER of real estate descr | recorded) in the 14. This FINANCING STA covers timber to build in item 16 16. Description of real estribution in the 17 parcel ID: | TEMENT: e cut | STATE | POSTAL CODE | COUNTRY |
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| 11c. 2. <i>A</i> | MAILING ADDRESS DDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or REAL ESTATE RECORDS (if applicable) ame and address of a RECORD OWNER of real estate descr | recorded) in the 14. This FINANCING STA covers timber to be obtained in item 16. Description of real estriction Parcel ID: P122953 PARCEL ID# | TEMENT: e cut covers as-existe: | STATE | POSTAL CODE | COUNTRY |
| 11c. 2. <i>F</i> | MAILING ADDRESS DDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or REAL ESTATE RECORDS (if applicable) ame and address of a RECORD OWNER of real estate descr | recorded) in the 14. This FINANCING STA covers timber to be obtained in item 16. Description of real estriction Parcel ID: P122953 PARCEL ID# | TEMENT: e cut covers as-existe: | STATE | POSTAL CODE | COUNTRY |

SERVICE FINANCE COMPANY, LLC File with: Skagit, WA

3439814

17. MISCELLANEOUS; 90646567-WA-57 46322 - SunTrust Bank

Debtor: GRIMM, CHRISTOPHER, B

Exhibit for Real Estate

16. Description of real estate: Continued

1261 ARREZO DR

SEDRO WOOLLEY, WA 98284

LEGAL DESCRIPTION:

(0.1500 ac)(SWFC) LOT 39, SAUK MOUNTAIN VIEW ESTATES SOUTH-A PLANNED RESIDENTIAL DEVELOPMENT PHASE 3, ACCORDING TO THE PLAT THEREOF, RECORDED MAY 26, 2005, UNDER AUDITOR'S FILE NO. 200505260107, RECORDS OF SKAGIT COUNTY, WASHINGTON.

QUARTER/SECTION/TOWNSHIP/RANGE NE 18 35 05

LAST SALE 11/17/2017

