

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

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| A. NAME & PHONE OF CONTACT AT FILER (optional) |
| B. E-MAIL CONTACT AT FILER (optional) |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) |
| Craft3 PO Box 530233 Atlanta, GA 30353-0233 |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | | |
|---------------------------|---------------------|-------------------------------|-------------|---------|
| 1a. ORGANIZATION'S NAME | | | | |
| OR | | | | |
| 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| Marlin | Matthew | Carl | | |
| 1c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| 28406 E Gilligan Creek Rd | Sedro-Woolley | WA | 98284 | USA |

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | | |
|---------------------------|---------------------|-------------------------------|-------------|---------|
| 2a. ORGANIZATION'S NAME | | | | |
| OR | | | | |
| 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| Glover | Sarah | Mireille | | |
| 2c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| 28406 E Gilligan Creek Rd | Sedro-Woolley | WA | 98284 | USA |

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

| | | | | |
|--------------------------|---------------------|-------------------------------|-------------|---------|
| 3a. ORGANIZATION'S NAME | | | | |
| Craft3 | | | | |
| OR | | | | |
| 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| | | | | |
| 3c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| 42 7th Street, Suite 100 | Astoria | OR | 97103 | USA |

4. COLLATERAL: This financing statement covers the following collateral:

Septic system repair or replacement at 28406 E Gilligan Creek Rd, Sedro-Woolley, WA 98284
Abbreviated Legal Description: (0.5000 AC) TAX 2 BEG AT SW C OF NW1/4 NE1/4, SECTION 35, TOWNSHIP 35 NORTH, RANGE 5 EAST, W.M., TH N 60 FT E 300FT S 60FT TH W 300FT TO BEG
Assessor's Parcel Number: P40673
Township-Range-Section: 35-5E-35
Full legal description on page 2.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:
SP-26238

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

| | |
|--|--------|
| 9a. ORGANIZATION'S NAME | |
| | |
| OR | |
| 9b. INDIVIDUAL'S SURNAME Marlin | |
| FIRST PERSONAL NAME Matthew | |
| ADDITIONAL NAME(S)/INITIAL(S) Carl | SUFFIX |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

| | | | | |
|--|--|--|--|--------|
| 10a. ORGANIZATION'S NAME | | | | |
| OR | | | | |
| 10b. INDIVIDUAL'S SURNAME Marlin | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME Matthew | | | | |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) C | | | | SUFFIX |

| | | | | |
|--|------------------------------|--------------------|-----------------------------|---------|
| 10c. MAILING ADDRESS 28406 E Gilligan Creek Rd | CITY Sedro-Woolley | STATE WA | POSTAL CODE 98284 | COUNTRY |
|--|------------------------------|--------------------|-----------------------------|---------|

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

| | | | |
|---------------------------|---------------------|-------------------------------|--------|
| 11a. ORGANIZATION'S NAME | | | |
| OR | | | |
| 11b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

| | | | | |
|----------------------|------|-------|-------------|---------|
| 11c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
|----------------------|------|-------|-------------|---------|

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:
 covers timber to be cut covers as-extracted collateral is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:
The Southwest Quarter of the Northeast Quarter, Section 35, Township 35 North, Range 5 East of the Willamette Meridian; EXCEPT roads. Also, that portion of the Northwest Quarter of the Northeast Quarter of Section 35, Township 35 North, Range 5 East of the Willamette Meridian, described as follows: Beginning at a point 20 feet East of the Southwest corner of said subdivision; Thence East 300 feet; Thence North 60 feet; Thence West 300 feet; Thence South 60 feet to the point of beginning. EXCEPT roads. Situate in the County of Skagit, State of Washington. Assessor's Parcel Number: P40673.

17. MISCELLANEOUS:
Sarah M Glover