95720 COUNTY WASHINGTON LEGAL BLANK, INC.

Liens chapter 60 13 RCW		BOOK /33 PAGE 701
DEBTOR(S) (see instruction #21 Debtor 1	2 FOR OFFICE USE O	
PERSONAL (last, first, middle name and address) SSN		
XIBUSINESS (legal business name and address) FEIN		
115672 Debter 2 SSN:		S EB ESKE
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STEVENSON CO-PLY, INC.		De Con ASC
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a Washington Corporation		2 - Bx
P.O. Box 910		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Stevenson, WA 98648	·	
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TRADE NAME, DBA, AKA:	-	$z - \omega R \omega^2$
3. SECURED PARTY(IES) Iname and address!	4	4. ASSIGNEE(S) of SECURED PARTY(IES) If tophcable I
es .		(name and address) STATE OF WASHINGTON
SKAMANIA COUNTY	4.4	DEPARTMENT OF COMMUNITY DEVELOPMENT
Board of County Commissioners		Development Loan Fund/CPD
		P.O. Box 48300
P.O. Box 790	•	01ympia, WA 98504-8300
Stevenson, WA 98648		Olympia, WA 30304-0300
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5. This change statement affects the original filing statement records	d with the Department of Licensin	List one number and date only. Dated MATCH 16, 1988
Original filing number 2295. 6. FEES: A \$7.00 filing fee is required for each action checked in box	7, except termination which require	es no fee. If additional sheets are attached for any of the actions,
the filing fee for each action shall be \$14.00.	1	
NUMBER OF ADDITIONAL SHEETIS) ATTACHED		
7. Please check one or more of the following actions:	at a Dahta to and Second Santati	and having life number shown in her 5, is still effective
CONTINUATION. The original financing statement between		
whose name(s) and address(es) appear in box 400	r the rinancing statement bearing to	te number shown in box 5 have been assigned to the Assignee(s)
	ie (mancing statement bearing file	number shown in box 5, to the property described in box 8, have
been assigned to the Assignee(s) whose name(s) and add	ressles) appear in box 4.	
AMENDMENT. Financing statement bearing file number st	nown in box 5 is amended as set fo	rth in box 8.
PARTIAL RE-SASE. Secured Farty releases the collateral d		
TERMINATION, Secured Partylies) no longer claims a secu	rity interest under the financing sta	stement bearing file number shown in box 5.
8. DESCRIPTION of partial assignment, amendment or partial release	:: (Attach additional 8 %" × 11" she	et(s) if needed)
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		Marile 2
	NO SECURED PA	BTY MANEISLAND SIGNATURE(S)
9. DEBTOR NAMEIS) AND SIGNATURE(S)	10. SECURED PA	RTY NAME(S) AND SIGNATURE(S)
9. DEBTOR NAMEIS) AND SIGNATURE(S)	4	RTY NAME(S) AND SIGNATURE(S)
	SKAMANTA	COUNTY
9. DEBTOR NAME(S) AND SIGNATURE(S) TYPE NAME(S) OF DEBTOR(S) AS IT APPEARS IN BOX 1	SKAMANTA	RTY NAME(S) AND SIGNATURE(S)
	SKAMANTA	COUNTY F SECURED PARTY(166) AS IT APPEARS IN BOX 3 OR 4
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