136501

BOOK 194 PAGE 9

FILED FOR RECORD
SKAMANIA COUNTY, WASH
SKAMANIA CO. TITLE

Oct 7 4 33 PM '99
Q Lowry
AUDITOR
GARY L. OLSON

WHEN RECORDED RETURN TO:
BANK OF AMERICA, N.A.
800 5TH AVE
P.O. BOX 84448
SEATTLE, WA 98104

WASHINGTON UCC-2 COUNTY AUDITOR FIXTURE FILING

1. Grantor(s): (last name first, and mailing address(es))	2. Grantee(s)/Assignee/Beneficiary:	3. Assignee(s) of Secured Party(ies):
MARGAUX, INC. TIN: dba THE STORE AT NORTH BONNEVILLE CHEVRON TIN: 51 W. CASCADE DRIVE NORTH BONNEVILLE, WA 98639	BANK OF AMERICA, N.A. 800 5TH AVE P.O. BOX 84448 SEATTLE, WA 98104	

THIS FIXTURE FILING SHALL COVER COLLATERAL THAT IS AFFIXED TO THE FOLLOWING DESCRIBED PROPERTY.

Reference Number: _____
Short Legal Description: LOT C-38, PLAT OF RELOCATED NORTH BONNEVILLE
Assessor's Tax Parcel ID#:02-07-20-1-3-0800-00
Legal Description: LOT C-38, PLAT OF RELOCATE NORTH BONNEVILLE - CBD, SHEET 9 AND 10, RECORDED IN BOOK "B" OF PLATS, PAGE 15 UNDER SKAMANIA COUNTY FILE NO. 83466, ALSO RECORDED IN BOOK "B" OF PLATS, PAGE 31, UNDER SKAMANIA COUNTY FILE NO. 84429, IN THE COUNTY OF SKAMANIA, STATE OF WASHINGTON.

Additional on page ____
Additional on page ____

THIS FIXTURE FILING COVERS THE FOLLOWING DESCRIBED PROPERTY

All Fixtures; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles, and accounts proceeds)

4. ☐ The debtor is the record owner.

5. This statement is signed by the Secured Party(ies)instead of the Debtor(s) to perfect a security interest in collateral. (Please check appropriate box)
- (a) ☐ already subject to security interest in another jurisdiction when it was brought into this state, or when the debtor's location was changed to this state, or
- (b) ☐ which is proceeds of the original collateral described above in which a security interest was perfected, or
- (c) ☐ as to which the recording has lapsed, or
- (d) ☐ acquired after a change of name, identity, or corporate structure of the debtor(s).

6. Complete fully if box (d) is checked; complete as applicable for (a), (b), and (c):
Original recording number _____
Office where recorded _____
Former name of debtor(s) _____

Dated _____, 19____

MARGAUX, INC.
JOSEPH L. GAMBLE, PRESIDENT and SANDRA J. GAMBLE, SECRETARY TREASURER
TYPE NAME(S) OF DEBTOR(S) (or assignor(s))
Sandra J. Gamble Sec.-Treas
Joseph L. Gamble Pres.
SIGNATURE(S) OF DEBTOR(S) (or assignor(s))

BANK OF AMERICA, N.A.
TYPE NAME(S) OF SECURED PARTY(IES) (or assignee(s))
Lyllian a Cline
SIGNATURE(S) OF SECURED PARTY(IES) (or assignee(s))

COPY 1 - COUNTY AUDITOR

FORM APPROVED FOR USE IN THE STATE OF WASHINGTON