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	COUNTRY	
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part of the Ind	lividual Debtor's	
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UCC FINANCING STATEMENT					
FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141					
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolter	rskluwer.com			4	
O OTHE ACIALOM EDGISTRY TO Alexan and Address	506503 - SIERRA VIEW				
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Lien Solutions P.O. Box 29071	68832881		4		
Glendale, CA 91209-9071	WAWA		a c	N 1	
11	FIXTURE I	₹.	ь,	/ N. T	
File with: Skamania, WA		THE ABOVE SPACE	CE IS FO	OR FILING OFFICE US	SE 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	he 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 Debto	or information in item 10 of the Fins	incing Sta	itement Addendum (Form I	UCC1Ad)
Ta. ORGANIZATION O NAME	A	- 16	*		,
OR 1b, INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME		NAL NAME(S)/INITIAL(S)	SUFFIX
WALKER	JOSHUA		J.	L DOOTH CODE	COUNTRY
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	ŀ
302 WANA KAWOK STREET 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b)	NORTH BO		WA he Debtor	98639 's name); if any part of the	USA Individual Debtor's
name will not fit in line 2b, leave all of item 2 blank, check here	and provide the Individual Debte	or information in item 10 of the Fina	encing Sta	tement Addendum (Form	UCC1Ad)
2a. ORGANIZATION'S NAME			4		
OR 2b, INDIVIDUAL'S SURNAME	FIRST PERSONA			NAL NAME(S)/INITIAL(S)	SUFFIX
WALKER	KATHERIN	IE .	E.		- COLINITEN
2c. MAILING ADDRESS	CİTY		STATE	POSTAL CODE	COUNTRY
302 WANA KAWOK STREET 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of A	NORTH BO		WA e (3a.or 3	98639	USA
3a, ORGANIZATION'S NAME	BOIGHON GEOGRED FAIRTY. TIE	VIGO STILLY SCORE LEGIS THE INC.			
INTERLOCK INDUSTRIES, INC.					
OR 3b, INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	_	STATE	POSTAL CODE	COUNTRY
PMB 425, 26910 92nd Avenue Northwest C-5	Stanwood		WA	98292	USA
COLLATERAL: This financing statement covers the following or THIS FIXTURE FILING COVERS A ROOFING SYST	ollateral:	DINITUE DEAL COTATE D	ECOB	DE OE SKAMANIA C	OLINITY MA
THIS FIX TURE FILING COVERS A ROOFING SYST	EIVI & IS TO BE RECORDE	DIN THE REAL ESTATE F	CECON	DO OF GRANNANIA C	OURTT, WA
COUNTY/RECORDING DISTRICT: SKAMANIA SITUS/ADDRESS: 302 WANA KAWOK ST, NORTH	BONNEVILLE WA 98639				
PARCEL #: 02-07-30-1-1-2900-00	D 0.111.12.12.1, 1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			•	
CONVEYS: STATUTORY WARRANTY DEED DOCUMENT NO: 2005158494	•	•			
DATE RECORDED: 8/25/2005	Z INLOMANIJA COLINITY I	MACHINGTON:			
LEGAL: THE FOLLOWING DESCRIBED PROPERTY LOT 2 OF BLOCK 3 OF THE PLAT OF RELOCATED) NORTH BONNEVILLE. RE	CORDED IN BOOK 'B' OF	PLATS	, PAGE 9, SKAMAN	A COUNTY
FILE NO. 83466, ALSO RECORDED IN BOOK 'B' OF WASHINGTON.	F PLATS, PAGE 25, SKAMA	NIA COUNTY FILE NO. 84	4429, R	ECORDS OF SKAM/	ANIA COUNTY
ABBREVIATED LEGAL:		ID DI AT I/D DO 55			•
LT 2, BLK 3, PLAT OF RELOCATED NORTH BONN	EVILLE, PLAT V B PG 9 AN	ID PLAT V B PG 25			

_					
5. Check only if applicable and che	ck <u>only</u> one box: Collateral isheld ir	a Trust (see UCC1Ad, item 17 ar	nd Instructions)	being administered by a De	cedent's Personal Representative
6a. Check only if applicable and ch	eck only one box:			6b. Check only if applicable	e and check <u>only</u> one box:
Public-Finance Transaction	Manufactured-Home Transa	action A Debtor is a Trans	mitting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor	Seller/Buye	r Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE 68832881	DATA: LOAN# WAWA19001-RC	- CALL# 877-765-9378		LOAN AMO	UNT: \$17,135.19
					d by Lien Solutions, P.O. Box 29071,

AFN #2019000351 Page: 2 of 2

UCC FINANCING STATEMENT ADDENDUM

be	ME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if lin	e 1b was left l	olank	1			
_	cause Individual Debtor name did not fit, check here			4			
	9a. ORGANIZATION'S NAME	•		· ·		-	
-				-			
R	9b, INDIVIDUAL'S SURNAME			-			
١	WALKER					~ ~	
ŀ	FIRST PERSONAL NAME			-		A 1	b.
	JOSHUA			₩.		/ D.	*
Ì	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	1 4	N 1		
	J			THE A	BOVE SPAC	E IS FOR FILING	OFFICE USE ON
). D	EBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or	Debtor name t	hat did not fit i	n line 1b or 2b o	of the Financing	Statement (Form UCC	C1) (use exact, full nam
	o not omit, modify, or abbreviate any part of the Debtor's name) and enter the ma				-3		
	10a, ORGANIZATION'S NAME	A	. 1		7 Y		
R			تنظ	_	4		
	10b. INDIVIDUAL'S SURNAME	77	7	7			
-	INDIVIDUAL'S FIRST PERSONAL NAME		_				
١	INDIVIDUAL OF INOTE ENOUGH IN MILE	\leftarrow \wedge	N 7)		- 16	
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		₹			_	SUFFIX
		3	T.		- 4		
0c.	MAILING ADDRESS .	CITY			STATE	POSTAL CODE	COUNTRY
1.	ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO	R SECURE	D PARTY'S	NAME: Prov	ide only one na	ne (11a or 11b)	
· ·	11a. ORGANIZATION'S NAME			7, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,	20 0 (I) <u>2112</u>	(1121111)	
					. 1	1 4	,
R	11b, INDIVIDUAL'S SURNAME	FIRST PERSO	ONAL NAME		ADDITI	ONAL NAME(S)/INITIAL	(S) SUFFIX
				7			
l 1c.	MAILING ADDRESS	CITY	€	7	STATE	POSTAL CODE	COUNTRY
	MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral):	CITY	1		STATE	POSTAL CODE	COUNTRY
		CITY	,)	STATE	POSTAL CODE	COUNTRY
		CITY	7)	STATE	POSTAL CODE	COUNTRY
		СІТУ	1)	STATE	POSTAL CODE	COUNTRY
		СІТУ)	STATE	POSTAL CODE	COUNTRY
		CITY)	STATE	POSTAL CODE	COUNTRY
		CITY)	STATE	POSTAL CODE	COUNTRY
2. <i>F</i>	ADDITIONAL SPACE FOR ITEM 4 (Collateral):		ANCING STA	TEMENT:	STATE	POSTAL CODE	COUNTRY
2. #		e 14. This FIN	ANCING STA	_			
2. <i>F</i>	ADDITIONAL SPACE FOR ITEM 4 (Collateral): . . This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	a 14. This FIN	ANCING STA	e cut 🔲 cov	STATE		COUNTRY
2. <i>A</i>	ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	a 14. This FIN	ers timber to be	e cut 🔲 cov			
2. <i>F</i>	ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	e 14. This FIN	ers timber to be ion of real esta	e cut 🔲 cov	vers as-extracted		
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