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Skamania County, WA Total:\$105.50 UCCT

Pgs=3

2020-000019

01/06/2020 11:26 AM

Request of: LIEN SOLUTIONS

## 0000222320200000190030037

FOLLOW INSTRUCTIONS	ENDWENI				
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-	-331-3282 Fax: 818-662-4141	]			
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address	s) 48466 - HomeStreet Bank	1			
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	72994859 WAWA			/	
l	FIXTURE <sub>1</sub>		400		
File with: Skamania, WA		THE ABOVE SPA	CE IS FOR	R FILING OFFICE US	E ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2007165038 2/16/2007 CC WA Skamania	1	b. This FINANCING STATEN (or recorded) in the REAL Filer: attach Amendment Addo	MENT AMEI ESTATE R endum (Form	NDMENT is to be filed [for ECORDS UCC3Ad) and provide Debto	or record]
TERMINATION: Effectiveness of the Financing Statement	ent identified above is terminated with				
ASSIGNMENT (full or partial): Provide name of Assigne For partial assignment, complete items 7 and 9 <u>and</u> als		signee in item 7c <u>and</u> name of As	signor in ite	em 9	
CONTINUATION: Effectiveness of the Financing Staten continued for the additional period provided by applicable.		e security interest(s) of Secured	Party autho	rizing this Continuation S	Statement is
5. PARTY INFORMATION CHANGE:	L.A.				
Check one of these two boxes:	AND Check one of these three boxe  — CHANGE name and/or ac		e: Complete	item DELETE name:	Give record name
This Change affects Debtor or Secured Party of recor			and item 7c	to be deleted in	item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party In	nformation Change - provide only one	name (6a or 6b)			
6a. ORGANIZATION'S NAME O & B Singh, Inc.			4	. 1	
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIONA	AL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment	ant or Rocky Information Change - provide only or	name (7a or 7h) (use avest full name)	do not ornit mo	diffe or obbrowints are part of th	o Dobtorio nome)
7a. ORGANIZATION'S NAME	in or Pary mornator change - provide only <u>or</u>	in marie (78 of 75) (use exect, for marie, c	30 Hot Office, mo	any, or abbreviate any part or an	e Detrior s Harrier
OR 7b. INDIVIDUAL'S SURNAME	*				
INDIVIDUAL'S FIRST PERSONAL NAME		$\overline{}$	-		
INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S)		1		·	SUFFIX
7c. MAILING ADDRESS	CITY		STATE I	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these to	four houses APD colletows	DELETE collateral R	FOTATE as		ASSIGN collateral
<ul> <li>COLLATERAL CHANGE: Also check one of these fundicate collateral:</li> <li>APN: 02-07-01-1-0-1500-00; 02-07-01-1-0-1500-80</li> <li>Abbreviated Legal Description:SEC 1 T2N R7E</li> </ul>		_ DELETE collateral	ESTATE CO	vered collateral	ASSIGN collateral
9. NAME OF SECURED PARTY OF RECORD AUTHO	DRIZING THIS AMENDMENT: Pro	vide only one name (9a or 9b) (na	me of Assig	nor, if this is an Assignme	ent)
If this is an Amendment authorized by a DEBTOR, check here	_				
9a. ORGANIZATION'S NAME HomeStreet Bank, a Washington State C	hartered Commercial Bank				
OR 95. INDIVIDUAL'S SURNAME	FIRST PERSONAL		ADDITION	1 NAME/CV/NUTIAL /CV	Lenen
30. INDIVIDUALS SURVANIC	PIROUPE	- NAME	ADDITIONA	AL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor Name	: O & B Singh, Inc.				

400000700

WESTERN-(00003)

72994859

_	LOW INSTRUCTIONS	
20	NITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 07165038 2/16/2007 CC WA Skamania	-
12.	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form	<del></del>
	12a. ORGANIZATION'S NAME HomeStreet Bank, a Washington State Chartered Commercial Bank	
OF	12b. INDIVIDUAL'S SURNAME	
	FIRST PERSONAL NAME	
	ADDITIONAL NAME(S)/INITIAL(S)  SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
13.	Name of DEBTOR on related financing statement (Name of a current Debtor of record required for ir one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of t	ndexing purposes only in some filing offices - see Instruction item 13): Provide only
	13a. ORGANIZATION'S NAME O & B Singh, Inc.	
OR	13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NA	AME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
O 8	otor Name and Address: & B Singh, Inc 333 Rock Creek Drive , Stevenson, WA 98648 cured Party Name and Address: meStreet Bank, a Washington State Chartered Commercial Bank - PO Box 2345 ,	Seattle, WA 98111
15.	This FINANCING STATEMENT AMENDMENT: 17.1	Description of real estate:

WESTERN-(00003) 400000700

[ See Exhibit for Real Estate ]

HomeStreet Bank, a Washington State File with: Skamania, WA

18. MISCELLANEOUS: 72994859-WA-59 48466 - HomeStreet Bank

Debtor: O & B Singh, Inc.

## Exhibit for Real Estate

17. Description of real estate: Continued

Parcel ID: 02-07-01-1-0-1500-00; 02-07-01-1-0-1500-80