		Skamania Co Total: \$203.50 UCC Request of: eRecorded by	Pgs=1 COVIUS	05/31/202 SERVICES LLC	- <b>000754</b> 23 07:43 AM
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional) 877-505-5400					
B. E-MAIL CONTACT AT FILER (optional) recordings@gorequire.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
Require Real Estate Solutions, LLC P.O. Box 860					
Palm Harbor, FL 34682	, [				
		THE ABOVE SPA	CE IS FOR I	FILING OFFICE USE O	NLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact full nar name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide	·				
1a. ORGANIZATION'S NAME		~		_	
OR 1b. INDIVIDUAL'S SURNAME Scheel	FIRST PERSONAL NAM Patrick	/E	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
1c. MAILING ADDRESS 342 HELEN'S LANE	CITY WASHOUGAL	V	STATE WA	POSTAL CODE 98671	COUNTRY
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact full nar name will not fit in line 2b, leave all of item 2 blank, check here and provide the control of the control					
2a. ORGANIZATION'S NAME	The marvada Bestor mor	material leni 10 of the	mancing ota	iomoni Addondam (i omi o	
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	ΛE	ADDITION.	AL NAME(\$)/INITIAL(\$)	SUFFIX
2c. MAILING ADDRESS	СІТУ		STATE	POSTAL CODE	COUNTRY
SECURED PARTY'S NAME: (or NAME of TOTAL ASSIGNEE of ASSIGNOR     3a. ORGANIZATION'S NAME	SECURED PARTY): Pro	vide only one secured p	arty name (3a	or 3b)	
Puget Sound Cooperative Credit Union		$\ell$			
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	Æ	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 11201 SE 8th Street, Suite 208	BELLEVUE			POSTAL CODE 08004-6420	COUNTRY
A COLLATEDAL. This forestice the second service the fells in called	16				
4. COLLATERAL: This financing statement covers the following collateral:  Fixtures and energy equipment, including but not	limited to resid	Hential solar e	nergy eau	uipment, all acce	essories
peripheral and associated equipment, and after ac					
LOT 2 OF HILLSBERRY ROAD SUBDIVISION, ACCORDING TRECORDS OF SKAMANIA COUNTY, WASHINGTON.	O THE PLAT THERE	OF, RECORDED U	NDER AUD	TTOR'S FILE NO. 2	020000931,
Parcel ID: 02053500100200					
5. Check only if applicable and check only one box: Collateral is held in a Tru	st (see UCC1Ad, item 17 a	nd Instructions)	ing administer	ed by a Deceden't Persona	al Representative
6a. Check only if applicable and check only one box:		6b. Check only if applicable and check only one box:			
Public-Finance Transaction Manufactured-Home Transaction  7. ALTERNATE DESIGNATION (if applicable): Lessee/Lessor	A Debtor is a Trasmi Consignee/Consignor	tting Utility Seller/Buyer	Agricultu		CC Filing e/Licensor
8. OPTIONAL FILER REFERENCE DATA Scheel643	<u> </u>				