

Skamania County, WA
Total: \$306.50 Pgs=4
UCC
Request of: CORPORATION SERVICE COMPANY (UCC)
eRecorded by: CSC Ingeo

2025-000092

01/21/2025 07:52 AM

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294	
B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <div>3017 83590 CSC 801 Adlai Stevenson Drive Springfield, IL 62703</div> <div>Filed In: Washington (Skamania)</div>	
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION	

THE ABOVE SPACE IS FOR FILING OFFICE USE 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 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 Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME					
OR	1b. INDIVIDUAL'S SURNAME French		FIRST PERSONAL NAME Angela	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 192 Sievers Road		CITY Washougal	STATE WA	POSTAL CODE 98671	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME 1st Security Bank of Washington					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS P. O. Box 97000		CITY Lynnwood	STATE WA	POSTAL CODE 98046	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:
HVAC

APN: 02052810010400

LEGAL: BEGINNING AT A POINT WHICH IS THE INTERSECTION OF THE SOUTH LINE OF THE BONNEVILLE POWER ADMINISTRATION ELECTRIC POWER LINE RIGHT-OF-WAY AND THE EAST LINE OF THE NORTHWEST QUARTER OF SECTION 28, TOWNSHIP 2 NORTH, RANGE 5 EAST OF THE WILLAMETTE MERIDIAN; THENCE NORTH 89 DEGREES 34 MINUTES 50 SECONDS EAST 347.00 FEET; THENCE SOUTH 00 DEGREES 26 MINUTES 45 SECONDS EAST 717.25 FEET; THENCE SOUTH 89 DEGREES 43 MINUTES 23 SECONDS WEST 604.00 FEET; THENCE ALONG A CURVE TO THE LEFT WITH A RADIUS OF 50 FEET THROUGH A CENTRAL ANGLE OF 120 DEGREES 00 MINUTES 00 SECONDS A DISTANCE OF 104.72 FEET; THENCE NORTH 00 DEGREES 25 MINUTES 45 SECONDS WEST 461.19 FEET; THENCE NORTH 50 DEGREES 56 MINUTES EAST 287.38 FEET TO THE SOUTH LINE OF SAID POWER LINE RIGHT-OF-WAY; THENCE NORTH 89 DEGREES 34 MINUTES 50 SECONDS EAST 75.77 FEET TO THE POINT OF BEGINNING. COUNTY OF SKAMANIA, STATE OF WASHINGTON.

5. Check only if applicable and check only one box: Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and Instructions) ☐ being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

☐ Agricultural Lien ☐ Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA: 5152961930 FRENCH (DEBTOR)

3017 83590

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here ☐

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S SURNAME

French

FIRST PERSONAL NAME

Angela

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

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10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. ☒ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

☐ covers timber to be cut

☐ covers as-extracted collateral

☒ is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

BEGINNING AT A POINT WHICH IS THE INTERSECTION OF THE SOUTH LINE OF THE BONNEVILLE POWER ADMINISTRATION ELECTRIC POWER LINE RIGHT-OF-WAY AND THE EAST LINE OF THE NORTHWEST QUARTER OF SECTION 28, TOWNSHIP 2 NORTH, RANGE 5 EAST OF THE WILLAMETTE MERIDIAN; THENCE NORTH 89 DEGREES 34 MINUTES 50 SECONDS EAST 347.00 FEET; THENCE SOUTH 00 DEGREES 26 MINUTES 45 SECONDS EAST 717.25 FEET; THENCE SOUTH 89 DEGREES 43 MINUTES 23 SECONDS

17. MISCELLANEOUS:
FIXTURE FILING

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here ☐

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INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

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POSTAL CODE

COUNTRY

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FIRST PERSONAL NAME

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16. Description of real estate:

WEST 604.00 FEET; THENCE ALONG A CURVE TO THE LEFT WITH A RADIUS OF 50 FEET THROUGH A CENTRAL ANGLE OF 120 DEGREES 00 MINUTES 00 SECONDS A DISTANCE OF 104.72 FEET; THENCE NORTH 00 DEGREES 25 MINUTES 45 SECONDS WEST 461.19 FEET; THENCE NORTH 50 DEGREES 56 MINUTES EAST 287.38 FEET TO THE SOUTH LINE OF SAID POWER LINE RIGHT-OF-WAY; THENCE NORTH 89 DEGREES 34 MINUTES 50 SECONDS EAST 75.77 FEET TO THE POINT OF BEGINNING. COUNTY OF SKAMANIA, STATE OF

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INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

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CITY

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COUNTRY

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11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

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15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

WASHINGTON.

17. MISCELLANEOUS: