UCC FINANCING STATEMENT AMENDMENT

LOW INSTRUCTIONS (front and back) CAREFULLY	Sk	agit Cou	nty Audit	or	
NAME & PHONE OF CONTACT AT FILER [optional]	9/28/2005	Page	1 of	2	8:57AN
WIB DOREEN 360240 2380 SEND ACKNOWLEDGMENT TO: (Name and Address)					
SEND ACKNOWLEDGMENT TO: (Name and Address)					
QUATTRO PROPERTIES L.L.C.	1				
12441 BARTHOLOMEW RD					
ANACORTES	ı I				
	THE ABOVE SF				
NITIAL FINANCING STATEMENT FILE # 200308050225		to be	FINANCING STAT filed [for record] (ESTATE RECO	or record	
TERMINATION: Effectiveness of the Financing Statement identified above is terminated wi	th respect to security interest(s) of the	Secured Party	authorizing this T	erminatio	on Statement.
CONTINUATION: Effectiveness of the Financing Statement identified above with respect continued for the additional period provided by applicable law.	t to security interest(s) of the Secure	d Party author	izing this Continu	ation Sta	tement is
The state of the s		f a sianas in it	0		
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7a or 7b and addre	ignee in item 7c; and also give name of secured Party of record. Check only				
MENDMENT (PARTY INFORMATION): This Amendment affects Debtor or S so check one of the following three boxes and provide appropriate information in items 6 and/or		one of these tw	o poxes.		
CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (ft name change) in item 7a or 7b and/or new address (if address change) in item 7c.	DELETE name: Give record nar to be deleted in item 6a or 6b.	ne ADD	name: Complete	e item 7a e items 7	or 7b, and als
Iname (if name change) in item 7a or 70 and/or new address (if address change) in item 72.	To be deleted in the it on or op.		To, also complete	, nome .	s i g (ii applio
6a. ORGANIZATION'S NAME					
QUATTRO PROPERTIES L'L.C.		1.1.0.0			
6b. INDIVIDUAL'S LAST NAME FIRST NAM	AE .	MIDDLE N	AME		SUFFIX
<u> </u>	100				
CHANGED (NEW) OR ADDED INFORMATION: [7a. ORGANIZATION'S NAME					
7b. INDIVIDUAL'S LAST NAME FIRST NAME	ME Sound of the second	MIDDLE N	AME		SUFFIX
	The same of the sa				
MAILING ADDRESS CITY		STATE	POSTAL CODE		COUNTR
	IOTION OF SOCIETY TOWN	7- 0004	NIZATIONAL ID #	4 16	
ORGANIZATION Corporation	ICTION OF ORGANIZATION	/g. URGA	NIZATIONAL ID#	, it any	
DEBIOR		May 15			
MENDMENT (COLLATERAL CHANGE): check only one box. escribe collateral deleted or added, or give entire restated collateral description,	or describe collateral assigned	-{/			
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AND THE STATE OF T					
					oy a Debtor wh
dds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, or					oy a Debtor wh
					by a Debtor wh
	theck here and enter name of DE		zing this Amendm		suffix

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 200308050225

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)

[12a. ORGANIZATION'S NAME:

WHIDBEY ISLAND BANK

OR 126 INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME.SUFFIX

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Skagit County Auditor

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