UCC FINANCING STATEMENT AMEND	MENT				
OLLOWINSTRUCTIONS		•			
 A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-866-484-2 	382	İ			
B. E-MAIL CONTACT AT FILER (optional)		#		144 M	
SPRFiling@cscinfo.com		Skagit Co	unty Auditor		\$73.00
SEND ACKNOWLEDGMENT TO: (Name and Address)		9/20/201		1 of 2	9:17AM
79899700 - 320540					9. 17AIVI
Corporation Service Company					
801 Adlai Stevenson Drive Springfield, IL 62703	led In: Washington				
J Springheid, ic 02103	(Skagit)				
	`			R FILING OFFICE USI	
I. INITIAL FINANCING STATEMENT FILE NUMBER		b. This FINANCING (or recorded) in the	STATEMENT AME	NDMENT is to be filed [fi	or record)
01202270080 02/27/2012				rm UCC3Ad) <u>and</u> provide De	otor's name in its
For partial assignment, complete items 7 and 9 and also indicate CONTINUATION: Effectiveness of the Financing Statement ide continued for the additional period provided by applicable law			of Secured Party	authorizing this Continua	tion Statemen
PARTY INFORMATION CHANGE:	Charles and the				
Check one of these two boxes.	Check one of these three bo — CHANGE name and/or a item 6a or 6b; and item 7	xes to: ddress: Complete/	DD name; Comple		: Give record r
This Change affects Debtor or Secured Party of record			a or 7b, <u>and</u> item 7	r to be deleted i	n item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information Ba. ORGANIZATION'S NAMEFIDALIZED Storage LLC	tion Change - provide only s	one name (6a or 6b)			
Idaigo otorage EEO					
6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFI		SUFFIX
		and the second			
CHANGED OR ADDED INFORMATION: Complete for Assignment or Pr	arty Information Change - provide o	nly <u>one</u> name (7a or 7b) (use ex	ect, full name, do not or	nit, modify, or abbreviate any par	i of the Debtor's na
7a. ORGANIZATION'S NAME			:		
R 75. INDIVIDUAL'S SURNAME				_	
75. INDIVIDUALS SURNAME			patrick to the first		
INDIVIDUAL'S FIRST PERSONAL NAME			A Committee of the Comm	· · · · · · · · · · · · · · · · · · ·	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				 h	SUFFIX
		``\			
: MAILING ADDRESS 2527 177th Street SE	ICITY		STATE	POSTAL CODE	COUNTR

ALL LEASES OF AND RENTS AND PROFITS FROM THAT CERTAIN REAL PROPERTY COMMONLY KNOWN AS 9008-9012 MOLLY LANE, ANACORTES, WA 98221 (THE "PROPERTY"); TOGETHER WITH ALL EQUIPMENT, FIXTURES, AND OTHER ARTICLES OF PERSONAL PROPERTY NOW OR HEREAFTER OWNED BY DEBTOR AND NOW OR HEREAFTER ATTACHED OR AFFIXED TO THE PROPERTY; TOGETHER WITH ALL ACCESSIONS, PARTS, AND ADDITIONS TO, ALL REPLACEMENTS OF, AND ALL SUBSTITUTIONS FOR, ANY OF SUCH PERSONAL PROPERTY; AND TOGETHER WITH ALL ISSUES AND PROFITS THEREON AND PROCEEDS

DELETE collateral

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)

If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAMEUnion Bank, N.A.

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA: Debtor: Fidalgo Storage LLC-: UB# 2779104087-1/17904/as/Skagit Co WA

79899700

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral

JCC FINANCING STATEMENT OLLOW INSTRUCTIONS				
1. INITIAL FINANCING STATEMENT FILE NUI 201202270080 02/27/2012	MBER: Same as item 1a on Amendment	l form		
2. NAME OF PARTY AUTHORIZING THIS AME	NDMENT: Same as item 9 on Amendo	nent form		
122 ORGANIZATIONS NAME Union Bank, N.A.				
	·			
12b. INDIVIDUAL'S SURNAME	<u> </u>			
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	THE ABOVE OBACE IS FOR EILING OFFICE.	IEE OUI V
	iment (Name of a current Debtor of recor	d required for indexin	THE ABOVE SPACE IS FOR FILING OFFICE In gournouses only in some filing offices - see Instruction item	
one Debtor name (13a or 13b) (use exact, full nam 13a. ORGANIZATION'S NAME	e, do not omit, modify, or abbreviate any	part of the Debtor's n	ame); see Instructions if name does not fit	
13a. ORGANIZATIONS NAME				
R 13b. INDIVIDUAL'S SURNAME	FIRST PI	ERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
BBREVIATED LEGAL: PTN OF NW SW OF Section 3 PESCRIPTION & PROPERTY IDS		nge 2 East, W	V.M.SEE EXHIBIT "A" FOR LEGAL	
This FINANCING STATEMENT AMENDMENT:	cted collateral is filed as a fixture f	17. Description	of real estate: HIBIT "A" FOR LEGAL DESCRIPTIO	N &
Name and address of a RECORD OWNER of real e (if Debtar does not have a record interest): idalgo Storage LLC		PROPER	RTY IDs	
527 177th Street SE				S
othell, WA 98102		Skagit	201309200023 County Auditor	<u>)</u>
		9/20/2	2013 Page 2 of 2 9:17A	.00

18. MISCELLANEOUS: