		10				 		
11						_		
É.,								
100			4	5			 	
- 8								
t, 8	S	25	400	1,44.	_	 		
3.								
3.4								

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional)
Corporation Service Company 1-866-484-2382 B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com SEND ACKNOWN FORMENT TO (Name and Address)



Skagit County Auditor 10/28/2013 Page

1 of

\$72.00 1 10:33AM

1a.	81008788 - 375680 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 INITIAL FINANCING STATEMENT FILE NUMBER 80901080047 01/08/2009 TERMINATION: Effectiveness of the Financing Statement in Statement		1b. This FINANCING (or recorded) in the Filer: attach Amend	TE SPACE IS FOR FILING OFFICE I STATEMENT AMENDMENT is to be file the REAL ESTATE RECORDS ment Addendum (Form UCC3Ad) and provide y interest(s) of Secured Party authorizing	d (for record) Debtor's name in item 13					
3.	ASSIGNMENT (full or partial): Provide name of Assignee in For partial assignment, complete items 7 and 9 and also indice			name of Assignar in item 9						
4.	CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law) of Secured Party authorizing this Conti	nuation Statement is					
	PARTY INFORMATION CHANGE: heck <u>one</u> of these two boxes: his Change affects Debtor <u>or</u> Secured Party of record	ND Check one of these three by CHANGE name and/or a litem 6a or 6b, and item 7		ADD name: Complete itemDELETE name	ame: Give record name ed in item 6a or 6b					
6. (CURRENT RECORD INFORMATION: Complete for Party Info	rmation Change - provide only	one name (6a or 6b)							
	. :									
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INIT(AL)	S) SUFFIX					
	HARRIS	JASON								
oR	I. ORGANIZATION'S NAME D. INDIVIDUAL'S SURNAME									
	INDIVIDUAL'S FIRST PERSONAL NAME				SUFFIX					
	!NDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		And the second s		SOFFIX					
7c.	MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY					
8.	COLLATERAL CHANGE: Also check one of these four boxe	es: ADD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN collateral					
(1) AP LE	I) WINDOWS PATIO DOOR IN: P68555 GAL: RANGE 04, SECTION 27, TOWNSHOUNTY, WASHINGTON.	IIP 35, ROLLING R	IDGE ESTATES	NO.1 LOT 10, RECORDS	OF SKAGIT					
11	NAME OF SECURED PARTY OF RECORD AUTHORIZII (this is an Amendment authorized by a DEBTOR, check here 9a, ORGANIZATION'S NAME1ST SECURITY BANK	and provide name of authorizing	g Debtor	or 9b) (name of Assignor, if this is an Assi	girment)					
		OF WASHINGTON	I		754 N					
OR	96. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX					
10.	OPTIONAL FILER REFERENCE DATA: Debtor: JASO	N HARRIS - HOLLY	/ HASSIS		81008788					

Corporation Service Company 2711 Centerville Rd, Ste. 400 Wilmington, DE 19808