

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS A NAME & PHONE OF CONTACT AT FILER [optional]	201702270042
Diana Norberg (509) 327-9634	Skagit County Auditor \$73.00
B. E-MAIL CONTACT AT FILER (optional) dianan@upfservices.com	2/27/2017 Page 1 of 1 9:23AM
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	-
UPF Services —	
12410 E. Mirabeau Parkway, Ste 100	
Spokane Valley, WA 99216	1
	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record]
201103020011 Filed 3/2/2011)	(or recorded) in the REAL ESTATE RECORDS Filer attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13
2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination . Statement.	
3. ASSIGNMENT (full or partial): Provide name of assignee in term 7a or 7b, and address of Assignee in item 7c, and name of Assignor in item 9.	
For partial assignment, complete items 7 and 9 and also indicate affected collaisral in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement dentified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.	
5. PARTY INFORMATION CHANGE:	
Check one of these two boxes: AND check one of these three boxes to: CHANGE name and/or address: Complete	
This Change affects Debtor or Secured Party of record item 6a or 6b; and item 7a or 7b and item 7c 7a or 7b, and item 7c to be deleted in item 6a or 6b	
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one hame (6a or 6b) 6a. ORGANIZATION'S NAME	
i da. ONOMIZATION S INNIE	
66. INDIVIDUAL'S SURNAME HUNZIKER LANCI	ONAL NAME (S)/INITIAL(S) SUFFIX
7. CHANGED OR ADDED INFORMATION Complete for Assignment or Party Information Change - provide only one name (7 and 7b) (use exact full name, do not omit, modify, or abbreviate any part of the Debtor's name)	
7a, ORGANIZATION'S NAME	
OR 75. INDIVIDUAL'S SURNAME	
INDIVIDUAL'S FIRST PERSONAL NAME	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S	SUFFIX
7c. MAILING ADDRESS CITY	STATE POSTAL CODE COUNTRY USA
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral	DELETE collateralASSIGN collateralASSIGN collateral.
Indicate collateral:	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDM	
If this is an Amendment authorized by a DEBTOR check here and provide name of auth	orizing Deblor
Puget Sound Cooperative Credit Union	S FIRST NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
9b. INDIVIDUAL'S SURNAME INDIVIDUAL	STINGT HAME ADDITIONAL MONEL(S) SOLETA
10. OPTIONAL FILER REFERENCE DATA UPF Tracking #3760095-34562 Loan #	SBA Loan #