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Skagit County Auditor 5/9/2017 Page

1 of

1 11:47AM

FOLLOWINSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional)
Corporation Service Company 1-800-858-5294 B. F-MAIL CONTACT AT FILER (optional)

- UCC FINANCING STATEMENT AMENDMENT

| SPRFilling@cscinfo.com | | | |
|---|---|---|-------------------------|
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | | | |
| 1308 83026 |] | | |
| Corporation Service Company | 1 | | |
| 801 Adlai Stevenson Drive | | | |
| Springfield, IL 62703 File | ed In: Washington | | |
| | (Skagit) | | |
| | | THE ABOVE SPACE IS FOR FILING OFFICE USE | ONLY |
| 1a. INITIAL FINANCING STATEMENT FILE NUMBER 201206110016 06/04/2012 | 11 | This FINANCING STATEMENT AMENDMENT is to be filed [for (or recorded) in the REAL ESTATE RECORDS Filer: gttach Amendment Addendum (Form UCC3Ad) gttach Amendment Addendum (Form UCC3Ad) | |
| TERMINATION: Effectiveness of the Financing Statement identification. | fied above is terminated wit | h respect to the security interest(s) of Secured Party authorizing this | Termination |
| ASSIGNMENT (full or partial): Provide name of Assignee in iten For partial assignment, complete items 7 and 9 and also indicate a | | ssignee in item 7c and name of Assignor in item 9 | |
| 4. CONTINUATION: Effectiveness of the Financing Statement Ide continued for the additional period provided by applicable law | ntified above with respect to | the security interest(s) of Secured Party authorizing this Continuati | ion Statement is |
| E DARTY INFORMATION CHANCE: | \ | | |
| 5. PARTY INFORMATION CHANGE: | Sheck one of these three bax | es to: | |
| CHECK One of these two boxes. | CHANGE name and/or ad item 6a or 6b; and item 7a | dress: CompleteADD name: Complete item DELETE name; | Give record name |
| This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information | | | iterii 6a bi 6b |
| Sa. ORGANIZATION'S NAMED & D LANDHOLDING CO | | g name (va ur ob) | |
| OR 6b. INDIVIDUAL'S SURNAME | FIRST PERSONA | L NAME ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| OD. INDIVIDUALS BUNIVAME | PIKST PERSONA | (I MARIE I MARIE (A) MATERIAL MARIE (A) | |
| Z CHANCED OR ADDED INCORMATION: Contract to Assessment and | at Information (Thomas and Asia | to a control (70 or 7h) / year and 6 M compared a part again modific or a hippopinto day part | of the Debtor's name) |
| CHANGED OR ADDED INFORMATION: Complete for Assignment or Pa Ta. ORGANIZATION'S NAME | inty information Change - provide on | y one name (7a or 70) (use exact, full hame, bo not omat, indonly, or abbreviate any part of | of the Deptor's Harrie) |
| | | | |
| OR 75 INDIVIDUAL'S SURNAME | | | |
| | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | | | * |
| | | | |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | | | SUFFIX |
| | | | |
| 7c. MAILING ADDRESS | CITY | STATE POSTAL CÓDE | COUNTRY |
| | Ì | | USA |
| O O O O O O O O O O O O O O O O O O O | | Ten ere annual. Decrete annual annual. | ACCIONI adilateral |
| 8. COLLATERAL CHANGE: Also check one of these four boxes: | ADD collateral | DELETE collateral RESTATE covered collateral | ASSIGN collateral |
| Indicate collateral: | | | |
| | | | |
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| | | | A |
| | | | |
| | | | |
| | | | \longrightarrow |
| 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING | | | ent) |
| | provide name of authorizing | Debtor | <u> </u> |
| 9a, ORGANIZATION'S NAMESKAGIT BANK | | | /// |
| OR 95 INDIVIDUAL'S SURNAME | FIRST PERSONA | L NAME ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

1308 83026

10. OPTIONAL FILER REFERENCE DATA: Debtor: D & D LANDHOLDING CO. LLC