

SBA Loan #

\$74.00 4 10:19AM

Skagit County Auditor 9/25/2017 Page UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) (509) 327-9634 Diana Norberg B. E-MAIL CONTACT AT FILER (optional) dianan@upfservices.com C. SEND ACKNOWLEDGMENT TO: Name and Address) **UPF Services** 12410 E. Mirabeau Parkway, Ste 100 Spokane Valley, WA 99216 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] (or recorded) in the REAL ESTATE RECORDS 201210250026 Filed 10/25/2012 Filer attach Amendment Addendum (Form UCC3Ad) 2. TERMINATION: Effectiveness of the Financing Statement identifies above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement ASSIGNMENT (full or partial): Provide name of assignee in item 78 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 collegeral in item 8 4. CONTINUATION: Effectiveness of the Financing Statement identitied 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 ene of these three boxes to: CHANGE name and/or address: Complete ADD name: Complete item DELETE name: Give record name This Change affects Debtor or Secured Party of record item 6a or 6b, and item 7a or 7b and item 7c \_\_\_\_ 7a or 7b, <u>and</u> item 7c to be deleted in item 6a or 6b 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one same (6a or 6b) 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) FIRST PERSONAL NAME SUFFIX Weideman Arthur one lame (7a or 7b) (use exact full name; do not omit, modify, or abbreviate any part of the Debtor's name 7. CHANGED OR ADDED INFORMATION Complete for Assignment or Party Information Change - provide only 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S SUFFIX POSTAL CODE COUNTRY 7c. MAILING ADDRESS CITY STATE USA 8 COLLATERAL CHANGE: Also check one of these four boxes: [ DELETE collateral RESTATE covered Collateral ASSIGN 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 NAME Puget Sound Cooperative Credit Union 9b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) INDIVIDUAL'S FIRST NAME

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10. OPTIONAL FILER REFERENCE DATA

UPF Tracking #4213837-36841