201901020089

UCC FINANCING STATEMENT AMENDMENT

01/02/2019 03:24 PM Pages: 1 of 3 Fees: \$101.0

FOLLOW INSTRUCTIONS	Skagit County Auditor	
A. NAME & PHONE OF CONTACT AT FILER (Optional)	<u> </u>	
B. EMAIL CONTACT AT FILER (Optional)		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		
Jeremy M. McLean, Esquire		
Troutman Sanders LLP		
Post Office Box 1122		
Richmond, Virginia 23218		
	THE ABOVE SPACE IS FOR FILING	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2019010 2 008 5	1b. This FINANCING STATEMENT AMEND record] (or recorded) in the REAL ESTA	TE RECORDS
TERMINATION: Effectiveness of the Financing Statement Identified above is terminal Statement	ted with respect to the security interest(s) of Secured Party authorizing	this Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and addre For partial assignment, complete items 7 and 9 and also indicate affected collateral in i		
CONTINUATION: Effectiveness of the Financing Statement identified above with rescontinued for the additional period provided by applicable law	pect to the security interest(s) of Secured Party authorizing this Continu	ation Statement is
5. PARTY INFORMATION CHANGE:		
Check one of these two boxes: AND Check one of these	hree boxes to:	
This Change affects Debtor or Secured Party of record CHANGE name and/or item 6a or 6b; and item	address: Complete ADD name: Complete item 7a or 7b and item 7c D to	ELETE name: Give record name be deleted in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provi	le only one name (6a or 6b)	
6a. ORGANIZATION'S NAME		
O R 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME ADDITIONAL NAM	E(S)/INITIAL(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change	e - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or ab	previate any part of the Debtor's name)
7a. ORGANIZATION'S NAME CITIBANK N.A., AS TRUSTEE FOR THE REGISTER	ED HOLDERS OF GS MORTGAGE SECU	RITIES
CORPORATION II, MULTIFAMILY MORTGAGE P.		
7b. INDIVIDUAL'S SURNAME		
INDIVIDUAL'S FIRST PERSONAL NAME		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
7c. MAILING ADDRESS	CITY STATE POST	AL CODE COUNTRY
c/o Wells Fargo Bank, National Association, Commercial	McLean VA 221	102 USA
Mortgage Servicing, 2010 Corporate Ridge, 10th Floor,		
Suite 1000, Attention: FREMF 2018-KF48 Asset Manager		
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD co	ateral DELETE collateral RESTATE covered coll	ateral ASSIGN collateral
Indicate Collateral:		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMEND		an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authors	rizing Debtor	
IZDE TICED MOUNTAIN OF ENTRY		
RETIGER VIOUNTAIN GLEN LLC R 9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME ADDITIONAL NAME	NE(S)/INITIAL(S) SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Mountain Glan (Local Stragit County, WA) (Londowns	r to I ander)	

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	C FINANCING STATEMENT AMENDMENT AD OW INSTRUCTIONS	DENDUM			
11. <i>i</i>	NITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amend	iment form			
	IAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Am				
	12a. ORGANIZATION'S NAME KRE TIGER MOUNTAIN GLEN LLC				
		 -			
OR	12b. INDIVIDUAL'S SURNAME				
	FIRST PERSONAL NAME				
	ADDITIONAL NAME(S)/INITIAL(S)	UFFIX			
40. 1	A DESTOR () Life in the Aller of a super Patrice o	a sired for indexing as		SPACE IS FOR FILING OFFICE USE	
13. N	lame of DEBTOR (on related financing statement (Name of a current Debtor of record ret ne Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any p	quired for indexing pu art of the Debtor's nai	rposes only in so ne); see Instruct	ions if name does not fit	Provide only
	13a. ORGANIZATION'S NAME				
OR	13b. INDIVIDUAL'S SURNAME F	IRST PERSONAL NA	ME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	155. INDIVIDUAL O CONTAINE				
14. A	DDITIONAL SPACE FOR ITEM 8 (Collateral):				
15. T	his FINANCING STATEMENT AMENDMENT:	17. Description o	f real estate:		
☐ co	overs timber to be cut				
16. N	ame and address of a RECORD OWNER of real estate described in item 17 if Debtor does not have a record interest):				
18 1	MISCELLANEOUS:		_		

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FOLLOW NSTRUCTIONS INTELLIPMENTS STATEMENT FILE NUMBER: Same as item 1s on Amendment form INTELLIPMENT AUTHORIZOR INTELLIPMENT SAMENDMENT: Same as item 9 on Amendment form INTELLIPMENT AUTHORIZOR INTELLIPMENT SAMENDMENT: Same as item 9 on Amendment form INTELLIPMENT AUTHORIZOR INTELLIPMENT SAMENDMENT: Same as item 9 on Amendment form INTELLIPMENT AUTHORIZOR INTELLIPMENT SAMENDMENT: Same as item 9 on Amendment form INTELLIPMENT AUTHORIZOR INTELLIPMENT SAMENDMENT: Same as item 9 on Amendment form INTELLIPMENT SAME ADDITIONAL DEBTOR'S NAME INTELLIPMENT SAME INTELLIPMENT		C FINANCING STATEMENT AMENDMENT ADD	OITIONAL PARTY				
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