## 201904010011

04/01/2019 08:32 AM Pages: 1 of 1 Fees: \$99.00

Skagit County Auditor, WA

UCC FINANCING STATEMENT AME	NDMENT			
A. NAME & PHONE OF CONTACT AT FILER (optional)	007.0004			
and the contract of the contra	327-9634			
B. E-MAIL CONTACT AT FILER (optional) dianan@upfservices.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
[a] M. J. J. J. D. J. Garage				
Chronos Mortgage Solutions	Cto 100			
12410 E. Mirabeau Parkway, Spokane Valley, WA 99216	Sie 100			
Spokatie valley, WA 99210	1			
			SPACE IS FOR FILING OFFICE	
ia. Initial financing statement file number 201706190108 Filed 6/19/2013		(or recorded) in th	STATEMENT AMENDMENT is to be fill be REAL ESTATE RECORDS	
2. ✓ TERMINATION: Effectiveness of the Financing Statem			nent Addendum (Form UCC3Ad) and provide rest(s) of Secured Party authorizing thi	
Statement.				
<ol> <li>ASSIGNMENT (full or partial) Provide name of assign For partial assignment, complete items 7 and 9 and also</li> </ol>		signee in item 7c, <u>and</u> na	me of Assignor in item 9	
CONTINUATION: Effectiveness of the Financing State continued for the additional period provided by applicable.	ement identified above with respect to t	he security interest(s) of S	ecured Party authorizing this Continual	lion Stalemenl is
PARTY INFORMATION CHANGE:				
Check one of these two boxes:	AND check one of these three box		DD name: Complete item DELETE i	nama: Giua record nan
This Change affects Debtor or Secured Party of reco	ord item 6a or 6b; and item 7a o	r7b <u>and</u> item7c 7a		led in item 6a or 6b
<ol> <li>CURRENT RECORD INFORMATION: Complete for P 6a. ORGANIZATION'S NAME</li> </ol>	arty Information Change - provide only	one name (6a or 6b)		
OR				
WHYBARK	FIRST PERSON		ADDITIONAL NAME(S)/INITIAL	(S) SUFFIX
7. CHANGED OR ADDED INFORMATION Complete for As				le any part of the Debtor's r
7a. ORGANIZATION'S NAME	11		and the second of the second o	::
OR 7b INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S				SUFFIX
INDIVIDUAL S ADDITIONAL INMIDISTRATIONAL				30111X
c MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY USA
B. COLLATERAL CHANGE: Also check one of these for	our boxes: ADD collateral	DELETE collateral	RESTATE covered Collateral	ASSIGN collateral
Indicate collateral:				
D. NAME OF SECURED PARTY OF RECORD A			e (9a or 9b) (name of Assignor, if this is	an Assignment)
If this is an Amendment authorized by a DEBTOR check 9a. ORGANIZATION'S NAME	here and provide name of authorizing	ng Debtor		
Puget Sound Cooperative Cre	edit Union			
OR 96. INDIVIDUAL'S SURNAME	INDIVIDUAL'S FI	RST NAME	ADDITIONAL NAME(S)/INITIAL	(S) SUFFIX
		***		
o. OPTIONAL FILER REFERENCE DATA Chronos Tracking #5538943-44128	Loan #		SBA Loan #	