## 202107060107

07/06/2021 12:43 PM Pages: 1 of 1 Fees: \$103.50

Skagit County Auditor, WA

UCC FINANCING STATEMENT AMENDMENT	
FOLLOW INSTRUCTIONS	
A NAME & PHONE OF CONTACT AT FILER [optional]  Diana Norberg (509) 327-9634	
B E-MAIL CONTACT AT FILER (optional)	
Diana.Norberg@covius.c	
C SEND ACKNOWLEDGMENT TO (Name and Address)	¬I
Chronos Mortgage Solutions	l
12410 E. Mirabeau Parkway, Ste 100	
Spokane Valley, WA 99216	
	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
18 INITIAL FINANCING STATEMENT FILE NUMBER	1b This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS
201906100009 Filed 6/10/2019	Figure attach Amendment Addendam (Form UCCSAG) and provide Debtor's name in item 13 minated with respect to the security interest(s) of Secured Party authorizing this Termination
Statement.	Illinated with respect to the security ill heresits) or secured raily authorizing this remaindren
ASSIGNMENT (full or partial) Provide name of assignee in item 7a or 7b, and a For partial assignment, complete items 7 and 9 and also indicate affected collateral.	
CONTINUATION: Effectiveness of the Financing Statement identified above wit continued for the additional period provided by applicable law.	th respect to the security interest(s) of Secured Party authorizing this Continuation Statement is
5. PARTY INFORMATION CHANGE:	
Check one of these two boxes:  AND check one of the	ese three boxes to.  a and/or address: Complete: ADD name: Complete item DELETE name: Give record name.
	ST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
2002000	Change - provide only one name (7a or 7b) (use exact full name; do not omit, modify, or abbreviate any part of the Debtor's name
7a ORGANIZATION'S NAME	
OR 7D. INDIVIDUAL'S SURNAME	<del></del>
INDIVIDUAL'S FIRST PERSONAL NAME	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S	SUFFIX
7c. MAILING ADDRESS CIT	STATE POSTAL CODE COUNTRY USA
8. COLLATERAL CHANGE: Also check one of these four boxes. ADD colla	aleralDELETE collateralRESTATE covered CollateralASSIGN collateral
Indicate collateral:	
If this is an Amendment authorized by aDEBTOR check here and provide nan	MENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) me of authorizing Debtor
Puget Sound Cooperative Credit Union	ARRIVAL MARKET AND ARRIVAL AND
95 INDIVIDUAL'S SURNAME INC	DIVIDUAL'S FIRST NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
10. OPTIONAL FILER REFERENCE DATA	
<u>Chronos Tracking #7478137-56811</u> <u>Loan #</u>	SBA Loan#