JCC FINANCING STATEMENT AMENDMENT  OLLOW INSTRUCTIONS (front and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]  Diligenz, Inc. 1-800-858-5294				20061020086 Skagit County Auditor		
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				10/20/2006		1 10:15AM
-				10/20/2006		
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Diligenz, In-	c. 📉 💉					
		kwy, Suite 400				
Mukilteo, W	A 962(5	Filed In: Washi	naton Skagit			•
		Filed in washi	ngton Skagit	THE ABOVE SPA	ACE IS FOR FILING OFFIC	E USE ONLY
LINITIAL FINANCING STA 9904160001 Boo	tement file # ok 1975 Page	0244 4/16/199	9	1b. This FINANCING STATEMENT AMENDMENT is to be filed from record) (or recorded) in the REAL ESTATE RECORDS.		
TERMINATION: E	fectiveness of the Fin	ancing Statement identified a	pove is terminated with respect	to security interest(s) of the	Secured Party authorizing this Te	
CONTINUATION:	Effectiveness of the F	Financing Statement identifie			Party authorizing this Continua	
		d by applicable law.				
			and address of assignee in ite			
			Debtor of Secured Pa	rty of record. Check only of	ne of these two boxes.	
Also check <u>one</u> of the folio CHANGE name and/or: in regards to changing t	wing three boxes <u>and</u> address: Please refer to	provide appropriate information	□ DELETE name: G	ive record name	ADD name: Complete item	7a or 7b, and also item 7c
		party.	to be deleted in ite	m 6a or 6b.	also complete items 7e-7g (	ifapplicable).
CURRENT RECORD IN						
Brown & Cole						
R 66. INDIVIDUAL'S LAST NAME			FIRST NAME	~ <del></del> _	MIDDLE NAME	SUFFIX
}			and the second second	<u> </u>		
CHANGED (NEW) OR A	ADDED INFORMATI	ION:				
7a. ORGANIZATION'S I						
BROWN & CO	·		FIRST NAME	<del></del>	MIDDLE NAME	SUFFIX
75. INDIVIDUAL'S LAST NAME		FIRST NAME	77 N	MIDDEE MAINE	1	
MAILING ADDRESS			CITY		STATE POSTAL CODE	COUNTRY
1331 Commercial PO BOX 9797		9797	Bellingham	A Section of Section 1995	WA 98227	USA
SEEINSTRUCTIONS	ADD'L INFO RE	7e. TYPE OF ORGANIZATIO	N 7f. JURISDICTION OF	ORGANIZATION	7g. ORGANIZATIONAL ID#	
	ORGANIZATION DEBTOR	Corp.	WA		UBI # 373 000 88	B3No
	ATERAL CHANGE	E); check only one box.		No.		
AMENDMENT (COLL		or give entire restated o	olleteral description or descri	be collateral assigned.		
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Describe collateral december of the describe collateral december of the described of the de	s 1 and 2 townsh )-0004 ) PARTY of REC	ORD AUTHORIZING THI		ssignor, if this is an Assignm and enter name of DEt	ent). If this is an Amendment aut BTOR authorizing this Amendm	thorized by a Debtor Whi
Describe collateral december of december o	s 1 and 2 townsh 0-0004 D PARTY OF REC 9 authorizing Debtor, NAME	ORD AUTHORIZING THI or if this is a Termination auth	S AMENDMENT (name of as orized by a Debtor, check here	ssignor, if this is an Assignmand and enter name of DEt	ent). If this is an Amendment aut	thorized by a Debtor white
Describe collateral december of the december o	s 1 and 2 townsh 0-0004 D PARTY of REC a authorizing Debtor, NAME	ORD AUTHORIZING THI	S AMENDMENT (name of as lorized by a Debtor, check here ding Corporation	ssignor, if this is an Assignmand and enter name of DE	ent). If this is an Amendment aut BTOR authorizing this Amendment MIDDLE NAME	thorized by a Debtor whi
Describe collateral december of Section 19 Lots arcel # 3772040-010  NAME OF SECURED adds collateral or adds the General Elect	s 1 and 2 townsh 0-0004 D PARTY of REC a authorizing Debtor, NAME	ORD AUTHORIZING THI or if this is a Termination auth	S AMENDMENT (name of as orized by a Debtor, check here	ssignor, if this is an Assignman and enter name of DE	BTOR authorizing this Amendm	erit.