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UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS



Skagit County Auditor

\$72.00

1 10:52AM

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5	294	3/13/2014	Page	1 of '	1 10:52AM
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		-			
85029892 - 320540					
	İ				
Corporation Service Company 801 Adlai Stevenson Drive		ļ			
	ed In: Washington				
	(Skagit)				
1a. INITIAL FINANCING STATEMENT FILE NUMBER		THE ABOVE		R FILING OFFIC	
200403260100 03/26/2004		(or recorded) in the	REAL ESTATE F	RECORDS	vide Debtor's name in item 13
TERMINATION: Effectiveness of the Financing Statement identity Statement	fled above is terminated w	ith respect to the security	interest(s) of Sec	ured Party authoria	zing this Termination
 ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate a 			ame of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement ide continued for the additional period provided by applicable law	ntified above with respect	to the security interest(s) o	of Secured Party	authorizing this Co	entinuation Statement is
5. PARTY INFORMATION CHANGE:		<u> </u>			
CiteCk one of these two poxes.	Check <u>one</u> of these three bo — CHANGE name and/or as		D name: Complet	te itemDELET!	E name: Give record name
This Change affects Debtor or Secured Party of record	CHANGE name and/or ac item 6a or 6b; <u>and</u> item 7		or 7b, <u>and</u> item 7c	to be de	eleted in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information		ne name (6a or 6b)		 -	·
6a. ORGANIZATION'S NAMEHUYCKE INVESTMENTS	IV, LLG				
OR 66 INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITION	VAL NAME(S)/INITi/	AL(S) SUFFIX
7 CHANCED OR ADDED INFORMATION: A	<u> </u>		. 6.0	the second the second test the second test test test test test test test tes	on and of the California
 CHANGED OR ADDED INFORMATION: Complete for Assignment or Par Ta. ORGANIZATION'S NAME 	ny information Change - provide of	uith alle traule (19 dt 10) (nze exec	L TUII HAINE, OU NOT UNI	it, modily, of appleviate	any part of the Debtor's frame)
75. INDIVIDUAL'S SURNAME			edit (Carelle		
INDIVIDUAL'S FIRST PERSONAL NAME					, <u>, , , , , , , , , , , , , , , , , , </u>
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		No.			SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collaterai	RESTATE A	overed collateral	ASSIGN collateral
Indicate collateral:				(Vel ex) Conatchai	A33IGIT CONGRETA
			(Ą
				<u> </u>	<u> </u>
B. NAME OF SECURED PARTY OF RECORD AUTHORIZING			9b) (name of Ass	ignor, if this is an A	ssignment)
If this is an Amendment authorized by a DEBTOR, check here and and San ORGANIZATION'S NAMEUNION Bank, N.A.	provide name of authorizing	Deptor			
Grion Bank, N.A.					
DR 9b. INDIVIDUAL'S SURNAME					
96. INDIVIDUALS SURNAME	FIRST PERSONA	AL NAME	ADDITION	IAL NAME(S)/INITIA	AL(S) SUFFIX

85029892

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