

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294 \$72.00 B. E-MAIL CONTACT AT FILER (optional) Skagit County Auditor SPRFiling@cscinfo.com 1 8:52AM 4/21/2014 Page 1 of C. SEND ACKNOWLEDGMENT TO: (Name and Address) 85028807 - 320540 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Washington (Skagit) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] 1a. INITIAL FINANCING STATEMENT FILE NUMBER (or recorded) in the REAL ESTATE RECORDS 200403260102 03/26/2004 Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assigner in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8 4. 🗸 CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law 5. PARTY INFORMATION CHANGE: AND Check one of these three boxes to: Check one of these two boxes: DELETE name: Give record name to be deleted in item 6a or 6b CMANGE name and/or address: Complete ADD name: Complete item fa or 6b; and item 7a or 7b and item 7c This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAMESECURITY AND INVESTMENT COMPANY OF LAKE OSWEGO, LLC 6b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only goe 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 **QR** 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Zc. MAILING ADDRESS POSTAL CODE COUNTRY CITY STATE 8. COLLATERAL CHANGE: Also check one of these four boxes: ASSIGN collateral ADD collateral DELETE collateral RESTATE covered collateral Indicate collateral 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here 🔲 and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME Union Bank, N.A.

FIRST PERSONAL NAME

10. OPTIONAL FILER REFERENCE DATA: Debtor: SECURITY AND INVESTMENT COMPANY OF LAKE OSWEGO, LLC

Corporation Service Company 2711 Centerville Rd, Ste. 400 Wilmington, DE 19808

SUFFIX

85028807

ADDITIONAL NAME(S)/INITIAL(S)

/EC 17904/DEERPOINT/LINNWOOD/1921086044/PP

9b. INDIVIDUAL'S SURNAME