

UČC FÍNÁNCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) Skagit County Auditor \$73.00 Barbara Basgall 405-236-0003 5/21/2014 Page 1 of 2 11:53AM B. E-MAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) Anderson, McCoy & Orta PC 100 North Broadway, Suite 2600 Oklahoma City, OK 73102 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS 1a, INITIAL FINANCING STATEMENT FILE NUMBER #200512290066 filed 12/29/2005 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 3. 🗸 ASSIGNMENT 📵 or partial): Provide name of Assignee in item 7a or Zonand address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8 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 (9HANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c DELETE name: Give record name to be deleted in item 6a or 6b ADD name: Complete item 7a or 7b, and item 7c This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information Charge provide only one name (6a or 6b) 6a, ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only and frame (7 a.g. 2h) (use exact, full name, do not omit, modify, or abbreviate any part of the Deblor's name) 7a. ORGANIZATION'S NAME J.S. BANK NATIONAL ASSOCIATION, AS TRUSTEE* 7ь. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7c. MAILING ADDRESS CITY POSTAL CODE COUNTRY 190 S. LaSalle Street, 7th Fl., Mail Code MK-IL-SL7 Chicago IL 60603 USA 8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral indicate collateral: * SUCCESSOR-IN-INTEREST TO BANK OF AMERICA, N.A., AS TRUSTEE, SUCCESSOR TO WELLS FARGO BANK, N.A., AS TRUSTEE, FOR THE REGISTERED HOLDERS OF WACHOVIA BANK COMMERCIAL MORTGAGE TRUST, COMMERCIAL MORTGAGE PASS-THROUGH CERTIFICATES, SERIES 2006-C23 ** FOR THE REGISTERED HOLDERS OF WACHOVIA BANK COMMERCIAL MORTGAGE TRUST COMMERCIAL MORTGAGE PASS-THROUGH CERTIFICATES, SERIES 2006-C23

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

BANK OF AMERICA, N.A., AS TRUSTEE**

9b. INDIVIDUAL'S SURNAME

SUFFIX ADDITIONAL NAME(S)/INITIAL(S) FIRST PERSONAL NAME

10. OPTIONAL FILER REFERENCE DATA: #208-11-The Outlet Shoppes at Burlington-AMO#165.0118 FILE WITH SKAGIT COUNTY, WA

FOLLOWINSTRUCTIONS			
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendm #200512290066 filed 12/29/2005	ent form		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME BANK OF AMERICA, N.A., AS TRUSTEE**			
OR 12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
		ABOVE SPACE IS FOR FILING OFFICE U	
 Name of DEBTOR on related financing statement (Name of a current Debtor of regne Debtor name (13a or 13b) (use exact, full name, 3c not omit, modify, or abbreviate at 			13): Provide only
13a. ORGANIZATION'S NAME BFO FACTORY SHOPPES LLC			
OR 13b. INDIVIDUAL'S SURNAME	PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	2 0 1 4 0 5 2 1 0 County Auditor 014 Page 2 0	\$73.00	
15. This FINANCING STATEMENT AMENDMENT:	17. Description of real ea		
covers timber to be cut covers as-extracted collateral	diess of a RECORD OWNER of real estate described in item 17 #1_92 AND PARCEL & AND B CITY OF BURLING		
	PARCEL NUM P101766	BERS: P24042, P24037, P2404	41 and
]	4	A STATE OF THE STA

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

18, MISCELLANEOUS: