



UCC FINANCING STATEMENT AMENDMENT \$72.00 Skagit County Auditor FOLLOW INSTRUCTIONS 1 8:35AM 7/18/2014 Page 1 of A. NAME & PHONE OF CONTACT AT FILER (optional) 1-800-858-5294 Corporation Service Company B. E-MAIL CONTAGT AT FILER (optional) SPRFiling@escinfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 89089772 - 344670 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Washington (Skagit) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY This FINANCING STATEMENT AMENDMENT is to be filed [for record] 1a. INITIAL FINANCING STATEMENT FILE NUMBER (or recorded) in the REAL ESTATE RECORDS 199912080001 12/08/1999 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 Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collaboral 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 CHANGE name and/or address: Complete item:6a or 6b; and item 7a or 7b and item 7c ADD name: Complete item 7a or 7b, and item 7c DELETE name: Give record name to be deleted in item 6a or 6b 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 NAMEBELA BERGHUYS OR 65. 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 wile name (7a gr. 2b) (use exact, full name; do not count, modify, or abbreviate any part of the Debtor's name) 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7c. MAILING ADDRESS CITY POSTÂL CODE COUNTRY 8. COLLATERAL CHANGE: Also check one of these four boxes: RESTATE covered collateral ADD collateral DELETE collateral ASSIGN 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 Assignorem) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 90. ORGANIZATION'S NAMESKAGIT STATE BANL

FIRST PERSONAL NAME

89089772

ADDITIONAL NAME(S)/INITIAL(S)

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

10. OPTIONAL FILER REFERENCE DATA: Debtor: BELA BERGHUYS - BELA BERGHUYS

9b. INDIVIDUAL'S SURNAME