



Skagit County Auditor 7/18/2014 Page

1 of

\$73.00 2 8:36AM

UCC FINANCING STATEMENT AMENUM FOLLOWING TRUETIONS	MEN I		
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-52	294		
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinto.com			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	·		
89080854 - 375680	7		
Corporation Service Company 801 Adlai Stevenson Drive	·		
Springfield, IL 62703 File	ed In: Washington		
	(Skagit)		
		OVE SPACE IS FOR FILING	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 201407070070 07/07/2014	(or recorded)	NG STATEMENT AMENDMENT in the REAL ESTATE RECORD: nendment Addendum (Form UCC3A	is to be filed [for record] S d) <u>and</u> provide Debtor's name in item 13
2. TERMINATION: Effectiveness of the Financing Statement identifications.	ed above is terminated with respect to the sec	curity interest(s) of Secured Par	ty authorizing this Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate af		and name of Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statement iden continued for the additional period provided by applicable law	tilled above with respect to the security intere	st(s) of Secured Party authorizi	ng this Continuation Statement is
5. PARTY INFORMATION CHANGE:		<u> </u>	
Check one of these two boxes: AND Check one of these two boxes:	neck sine of these three boxes to:	, ADD name: Complete item	- DELETE name: Give record name
This Change affects Debtor or Secured Party of record	CRANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c	7a or 7b, and item 7c	to be deleted in item 6a or 6b
5. CURRENT RECORD INFORMATION: Complete for Party Information	on Change - provide only one name (6a or 6b)		
6a. ORGANIZATION'S NAME			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAM	E(S)/INITIAL(S) SUFFIX
Hoy	Catherine	ADDITIONAL NAMI	E(S)HINTIME(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Parts	The second secon		- Line (1) - Data de la
78. ORGANIZATION'S NAME	y information Change - provide only <u>जार</u> name (7a oह नक्ष्म्	se exact, full name; do not omit, mobily, o	r appreviate any part of the Demors name)
	Territoria de la companio del companio de la companio della compan	Physical Humanical	
7b. INDIVIDUAL'S SURNAME			
	The second secon	A STATE OF THE STA	
INDIVIDUAL'S FIRST PERSONAL NAME	Marie Control of the	7	
	in the second of		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX
7c. MAILING ADDRESS	CITY	STATE POSTAL	CODE COUNTRY
COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral DELETE collatera	RESTATE covered co	Material ASSIGN collateral
Indicate collateral:			
		/	
NAME OF SECURED PARTY RECORD AND ADDRESS OF THE PARTY ADDRESS OF THE PARTY RECORD AND ADDRESS OF THE PARTY RECORD AND ADDRESS OF THE PARTY RECORD AND ADDRESS OF THE PARTY RECORD ADDRESS OF THE PARTY			
NAME OF SECURED PARTY OF RECORD AUTHORIZING T If this is an Amendment authorized by a DEBTOR, check here and p	"HIS AMENDMENT: Provide only one name provide name of authorizing Debtor	(9a or 9b) (name of Assignor, if the	ns is an Assign/Went)
9a. ORGANIZATION'S NAME1st Security Bank of Washi			
Tot Gooding Durin of Washing			
9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAMI	E(S)/INITIAL(S) SUFFIX
			and the second s
0. OPTIONAL FILER REFERENCE DATA: Debtor: Catherine	Hoy-5150701880	<u> </u>	89080854

FOLLOW INSTRUCTIONS	
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendme 201407070070 07/07/2014	ent form
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amend	idment form
12a. ORGANIZATIONS NAME 1st Security Bank of Washington	
OR	
12b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME	
PIKST PEKSUNAL NAME	
ADDITIONAL NAME(S)/INIT(AL(S)	SUFFIX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
13. Name of DEBTOR on related financing statement (Name of a curein Debtor of recome Debtor name (13a or 13b) (use exact, full name, do not omit, mosfily, or abbreviate an	cord required for indexing purposes only in some filling offices - see Instruction item 13): Provide
13a ORGANIZATION'S NAME	ny part or the Debior's name); see instructions if rialme does not fit
	PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX THERINE
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):	
	201407180005 \$73.00 Skagit County Auditor
	201407180005 \$73.00 Skagit County Auditor 7/18/2014 Page 2 of 2 8:36AM
	Skagit County Auditor
	Skagit County Auditor 7/18/2014 Page 2 of 2 8:36AM 17. Description of real estate: APN: P10/7352
covers timber to be cut covers as-extracted collateral is filed as a fixture 16. Name and address of a RECORD OWNER of real estate described in item 17	Skagit County Auditor 7/18/2014 Page 2 of 2 8:36AM 17. Description of real estate: APN: P10/7352
covers timber to be cut covers as-extracted collateral is filed as a fixture 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):	Skagit County Auditor 7/18/2014 Page 2 of 2 8:36AM 17. Description of real estate: APN: P10/7352
covers timber to be cut covers as-extracted collateral is filed as a fixture 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): CATHERINE HOY	Skagit County Auditor 7/18/2014 Page 2 of 2 8:36AM 17. Description of real estate: APN: P107352 LEGAL: LOT 10, "FOREST PARK ADDITION," AS PIPLAT RECORDED IN VOLUME 16 OF PLATS, PAG
16. Name and address of a RECORD OWNER of real estate described in item 17	Skagit County Auditor 7/18/2014 Page 2 of 2 8:36AM 7/18/2014 Page 17. Description of real estate: APN: P107352 LEGAL: LOT 10, "FOREST PARK ADDITION," AS PI

18. MISCELLANEOUS: