



UCC FINANCING STATEMENT AMENDMEN	IT	7/25/2014 Pa	Auditor Iae	1 of 1	\$72.00 10:17AM
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294		1	_	,	10.17 Alvi
B. E-MAIL CONTACT AT FILER (optional)		1			
SPRFiling@cscinfo.com C. SEND ACKNOWLEDGMEN* TO: (Name and Address)		<u> </u>			
89319930 - 306770	\neg				
Corporation Service Company	'				
801 Adlai Stevenson Drive					
Springfield, IL 62703 Filed In:	Washington (Skagit)				
		THE ABOVE SPACE			
1a, INITIAL FINANCING STATEMENT FILE NUMBER 200405270098 05/27/2004		1b. This FINANCING STATEM (ar recorded) in the REAL I Filer: <u>attach</u> Amendment Adde	ESTATE RECO	ORDS	•
2. TERMINATION: Effectiveness of the Financing Statement identified about statement	ve is terminated v	with respect to the security interest	(s) of Secured	Party authorizing	this Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or For partial assignment, complete items 7 and 9 and also indicate effected.			Assignor in ite	em 9	
CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law	bave with respect	to the security interest(s) of Secu	red Party auth	orizing this Continu	uation Statement is
5. PARTY INFORMATION CHANGE:	Para and Market and American Street				
	e of these three b		: Complete iter and item 7c	m DELETE nam	ne: Give record name In item 6a or 6b
This Change affects Debtor or Secured Party of record Items 6. CURRENT RECORD INFORMATION: Complete for Party Information Change	the state of the s		ing item /c		III Reil Ga Gi GD
6a. ORGANIZATION'S NAMEMacjennen, LLC				.	
OR 6b. INDIVIDUAL'S SURNAME	(FIRST PERSON	AL NAME	ADDITIONAL P	NAME(S)/INITIAL(S	SUFFIX
OD. INDIVIDUALS SURNAME	FIRST PERSON	TAL NAME	ACCITIONAL	AHMICLOSININI NINUS) Jauren
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informa	ntion Change - provide	only one name (7a on 3b) (use exact, full nam	ne; do not omít, mo	dify, or abbreviate any p	art of the Debtor's name)
7a, ORGANIZATION'S NAME					
OR 75. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		The same of the sa	All Parks	· · · · · · · · · · · · · · · · · · ·	SUFFIX
7c. MAILING ADDRESS	CITY		STATE POS	STAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: AD	D collateral	DELETE collateral	STATE covers	ed ceilateral	ASSIGN collateral
Indicate collateral:		_			_
				Annual Control of the	
			1		
			•	\mathbb{V}/\mathbb{A}	
 NAME of SECURED PARTY OF RECORD AUTHORIZING THIS A If this is an Amendment authorized by a DEBTOR, check here and provide 	MENDMENT: F name of authorizing		ame of Assigno	r, if this is an Assign	(Ineira
9a. ORGANIZATION'S NAMEWashington Federal successor	by merger	to Horizon Bank			
OR 96. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIONAL I	NÄME(\$)/INITIAL(S) SUFFIX
46 0000000 50000000000000000000000000000	10 050 0	- 000075 <i>t</i>	·		
10. OPTIONAL FILER REFERENCE DATA: Debtor: Macjennen, L	i C + 350 - 60	5-358275-4			90310030

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