



Skagit County Auditor

\$74.00

9/22/2015 Page

1 of

3 8:33AM

FOLLOW INSTRUCTIONS	•
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294	
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
105233940 - 308510 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: W	Vashington .
Fined III. V	(Skagit)
	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 201011010128 11/01/2010	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13
TERMINATION: Effectiveness of the Financing Statement identified above Statement	e is terminated 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 78 For partial assignment, complete items 7 and 9 and also indicate specied or	
4. CONTINUATION: Effectiveness of the Financing Statement identified ab continued for the additional period provided by applicable law	eve with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is
5. PARTY INFORMATION CHANGE:	
Check one of these two boxes.	2 offinese three boxes to: GE name and/or address: Complete aor 6b: and item 7a or 7b and item 7c Ta or 6b: and item 7a or 7b and item 7c
This Change affects Debtor or Secured Party of record items 6. CURRENT RECORD INFORMATION: Complete for Party Information Change and Change	
6a. ORGANIZATION'S NAMESRH LLC SKAGIT CROSSFIT	
OR OL HADDAGO CHOMAN	Labertow Average Courts
6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informati	ion Change - provide only one name (Zaror To) (use exect, full name; do not omit, modify, or abbreviate any parl 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 STATE POSTAL CODE COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD	D collateral DELETE collateral RESTATE everge conateral ASSIGN collateral
Indicate collateral: PMSLIN ALL FIXTURES: WHETHER ANY OF THE F	OREGOING IS OWNED NOW OR ACQUIRED LATER; ALL
▼	SUBSITTUTIONS RELATING TO ANY OF THE FOREGOING'
	OF THE FOREGOING; ALL PROCEEDS RELATING TO ANY OF
	ERAL INTANGIBLES AND ACCOUNTS PROCEEDS).
ABBREV LEGAL 07/34/04	
	MENDMENT: 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 r 9a. ORGANIZATION'S NAME Columbia State Bank	name of authorizing Debtor
OR 96. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
as. Morridone o derivante	ADDITIONAL IAMIC(S) (SOFTWARE)
10. OPTIONAL FILER REFERENCE DATA: Debtor: SRH LLC SKA	OUT OF OCCUTE 4404 (4000000000

UC	CC FINANCING STATEMENT AMENDMENT ADDENDU	VI
	LLOWINSTRUCTIONS	
11. 2(INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 01011016128 11/01/2010	7
	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form	
	12a. ORGANIZATIONS MAME Columbia State Bank	7
QR	12b INDIVIDUAL'S SURNAME	<u></u>
	FIRST PERSONAL NAME	
	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
13.	Name of DEBTOR on related financing statement (Name of a curem Debtor of record required for indi- one Debtor name (13a or 13b) (use exact, full name, do not opiit, modify of abbreviate any part of the Debtor	exing purposes only in some filing offices - see Instruction item 13): Provide only 's name); see Instructions if name does not fit
	13a. ORGANIZATION'S NAME	
OR	13b. INDIVIDUAL'S SURNAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
14.	ADDITIONAL SPACE FOR ITEM 8 (Collateral):	
15	This FINANCING STATEMENT AMENDMENT: 17. Descrip	ption of real estate:
,	covers timber to be cut covers as-extracted collateral is filed as a fixture filing	
	Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):	

18. MISCELLANEOUS:

			.i	1987		
UCC FINANCING STATEMENT ADDENDUM		1 2	$\mathcal{K}_{\mathrm{ol}}$	1985		
FOLLOW INSTRUCTIONS (from and back) CAREFULLY 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STAT	rement	1 67	, Y			
30. ORGANIZATION'S NAME] <i>*/</i>				
OR SRH LLC DBA OR 96. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFE					
19. MISCELLANEOUS:). OF 15	s for filing of	EIVE HEEF C	MALI V
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - #16ert-6nly one n	rame (11a nr 11b) - do revi abbo		ACER	S FUR HUNG OF	FIGE USE C	, IOC 1
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME ANSARS AND	Ente (118 of 110) - 00 100 (400)	no remain the section (on passing page).				
OR	<u> </u>		IDDLEN	IAME	Tsui	FFIX
11b. INDIVIDUAL'S LAST NAME	FIRST NAME		IIDDLC IV	A CANAL		
11c. MAJLING ADDRESS	CITY	s	TATE	POSTAL CODE	COI	UNTRY
11d. SEE INSTRUCTIONS ADD'L INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	111 JURISDICTION OF ORG	ANIZATION 1	ig. ORG	ANIZATIONAL ID#,	й апу	NONE
12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S	NAME - insert only one nam	ne (12a or 12b)				
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME	N N	NODLEN	IAME	SU	FFIX
		The second second		<u> </u>		
12c. MAILING ADDRESS	CITY		TATE	POSTAL CODE	co	UNTRY
13. This FINANCING STATEMENT covers timber to be cut or collateral, or is filed as a feature filing. 14. Description of real estate: THAT PORTION OF THE WEST 1/2 OF THE SOUTHWEST 1/4 OF THE NORTHEAST 1/4 OF SECTION 7, TOWNSHIP 34 NORTH, RANGE 4 EAST, W.M., LYING WESTERLY OF THAT CERTAIN TRACT TAKEN BY THE STATE OF WASHINGTON IN SKAGIT COUNTY SUPERIOR COURT, CAUSE NO. 33544, BY THE STATE OF WASHINGTON IN SKAGIT COUNTY SUPERIOR COURT, CAUSE NO. 33544, UNDER STIPULATED JUDGEMENT AND DECREE OF APPROPRIATION ENTERED JANUARY 30, 1974, EXCEPT THE NORTH 660 FEET THEREOF, AND ALSO EXCEPT THE SOUTH 30 FEET THEREOF CONVEYED TO THE STATE OF WASHINGTON BY DEED DATED JUNE 19, 1957 AND RECORDED OCTOBER 17, 1957, UNDER AUDITOR'S FILE NO. 557370 FOR ROAD PURPOSES, SITUATED IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON 15. Name and address of a RECORD OWNER of above-described real estate (if Detror does not have a record interest): 1-5 AUTO ACCESSORY OUTLET LLC PO BOX 914 MOUNT VERNON, WA 98273	17. Check only if applicable and Debtor is a Trust or Debtor is a TRANSMITTI	and check only one box. Trustee acting with respand check only one box.	ect to pro	operity held in trust	or Second	ents Estate
	Filed in connection with a	Mamufactured-Home Tra		•		Market Control
	Filed in connection with a	Public-Finance Transac	tion			