



Skagit County Auditor 7/29/2016 Page

1 of

\$73.00 110:27AM

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) (509) 327-9634 Diana Norberg B. E-MAIL CONTACT AT FILER (optional) dianan@upfservices.com C. SEND ACKNOWLEDGMENT TO (Name and Address) **UPF Services** 12410 E. Mirabeau Parkway, Ste 100 Spokane Valley, WA 99216 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE NUMBER This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS <u>201108220071</u> Filed 8/22/2011 TERMINATION: Effectiveness of the Financing Statement identified above 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 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 collate at in item 8 CONTINUATION: Effectiveness of the Financing Statement in the financing statement is boye with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law PARTY INFORMATION CHANGE: Check one of these two boxes AND check one of these three boxes to CHANGE name and/or address: Complete ADD name: Complete item DELETE name: Give record nar This Change affects Debtor or Secured Party of record item 6a or 8b; and item 7a or 7b and item 7c to be deleted in item 6a or 6b 6. CURRENT RECORD INFORMATION: Complete for Party Information Change provide only one frame (6a or 6b) 6a, ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Terrence McDonald 7. CHANGED OR ADDED INFORMATION Complete for Assignment of Party Information Change - provide only on an are 178 or 70) (use exact full name; do not on'il, 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 COUNTRY 7c. MAILING ADDRESS STATE PØSTAL CODE CITY USA COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered 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, it this is an Assignor ent) If this is an Amendment authorized by a DEBTOR check here and provide name of authorizing Debtor

Puget Sound Cooperative Credit Union

96. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST NAME

ADDITIONAL NAME(S)/INITIAL(S)

10. OPTIONAL FILER REFERENCE DATA UPF Tracking #3291972-32411

Loan #

SBA Loan #