

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional)
Corporation Service Company 1-800 \$73.00 **Skagit County Auditor** 1-800-858-5294 1 9:11AM 1 of 3/13/2017 Page B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscipfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 1283 06576 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Washington (Skagit) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] 1a. INITIAL FINANCING STATEMENT FILE NUMBER (or recorded) in the REAL ESTATE RECORDS 201204180015 04/18/2012 Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 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 (tull or partial): Provide name of Assignee in Item 7a or The and address of Assignee in Item 7c and name of Assignee in Item 9 For partial assignment, complete items 7 and 9 and also indicate affected collaboral in item 8 4. 📝 CONTINUATION: Effectiveness of the Financing Statement dentined 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 gne 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) BAL ORGANIZATION'S NAME COOKERY ADRIFT LLC 6b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party information Change - provide only one name (7a or 7b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name) 7a ORGANIZATION'S NAME OR 75. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME SUFFIX INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) JPOS AL CODE 7c. MAILING ADDRESS STATE COUNTRY USA DELETE collateral RESTATE govered collateral ASSIGN collateral 8. COLLATERAL CHANGE: Also check one of these four boxes: ADD 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 Assignor, if the Assignor is a As If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 19a. ORGANIZATION'S NAMESKagit Bank

FIRST PERSONAL NAME

1283 06576
Corporation Service Company

Wilmington, DE 19808

SUFFIX

ADDITIONAL NAME(S)/INITIAL(S)

10. OPTIONAL FILER REFERENCE DATA: Debtor: COOKERY ADRIFT LLC

9b. INDIVIDUAL'S SURNAME