



Skagit County Auditor

\$74.00 2 10:05AM

FOLLOW INSTRUCTIONS	ENT	6/22	2/2017 Page	7 01 2	10.001
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	<u>-</u>				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		1			
1325 80802	\neg	1			
Corporation Service Company	'				
801 Adlai Stevenson Drive Springfield, IL 62703					
Filed I	ln: Washington (Skagit)				
	(Sindgil)	THE AB	OVE SPACE IS FOR FI	ING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER		1b. This FINANCII	NG STATEMENT AMENDM	ENT is to be filed [for	
201212100087 12/10/2012		(or recorded) i	n the REAL ESTATE RECC endment Addendum (Form UC	ORDS	
2. TERMINATION: Effectiveness of the Financing Statement identifies Statement	above is terminated v	with respect to the sec	curity interest(s) of Secured	Party authorizing this	s Termination
ASSIGNMENT (full or partial): Provide name of Assignse in item 7a For partial assignment, complete items 7 and 9 and also indicate affect			and name of Assignor in ite	т 9	
4. CONTINUATION: Effectiveness of the Financing Statement identifier continued for the additional period provided by applicable law	ed above with respect	to the security interes	st(s) of Secured Party author	orizing this Continuat	ion Statement is
5. PARTY INFORMATION CHANGE:					
	k one of these three b		ADD name: Complete iter	m DELETE como:	Give record name
	HANGE name and/or ern 6a or 6b; <u>and</u> item		7a or 7b, <u>and</u> item 7c	to be deleted in	item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information (<u>оле</u> name (6a or 6b)			
68. ORGANIZATION'S NAMEMONETT FAMILY ENTERPH	RISES, LLC				
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL I	NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inf	formation Change - provide	only <u>crei</u> name (7a or 7h) (us	E exact, full name; do not omit, mo	dify, or abbreviate any part	of the Debtor's name)
7a. ORGANIZATION'S NAME		7//			
OR THE INDIVIDUAL OR CHICANAMI			<u> </u>		
7b. INDIVIDUAL'S SURNAME			A CONTROL OF THE PARTY OF THE P		
INDIVIDUAL'S FIRST PERSONAL NAME	_		A CONTRACTOR OF THE PARTY OF TH		
		No management			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	~			•	SUFFIX
7c. MAILING ADDRESS	CITY		STATE POS	TAL CODE	COUNTRY
					USA
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE CONGRE	ed colleteral	ASSIGN collateral
All Fixtures located at 1704 Commercial Ave, Anacacquired later; all accessions, additions, replacementary kind relating to any of the foregoing; all proceed intangibles and other accounts proceeds)	ents, and subs	titutions relatir	ng to any of the fo	regong, all re	cords of
Assessor's Tax Parcel ID#: 3772-046-008-0005					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THI If this is an Amendment authorized by a DEBTOR, check here and prov 9a. ORGANIZATION'S NAMEWhidbey Island Bank	S AMENDMENT: F vide name of authorizing	-	(9a or 9b) (name of Assigno	r, if this is an Assignm	
·					
9b. INDIVIDUAL'S SURNAME	FIRST PERSON	NAL NAME	ADDITIONAL !	NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor: MCNETT FA	AMILY ENTER	RPRISES, LLC	:-:SBA/MCNETT I	AMILY	1325 80802

UCC FINANCING STATEMENT A	MENDMENT ADDE	NDUM		
FOLLOWINSTRUCTIONS				
11. INITIAL FINANCING STATEMENT FILE NUMBER 201212100087 12/10/2012	: Same as item 1a on Amendment form			
12. NAME OF PARTY AUTHORIZING THIS AMENDM	ENT: Same as item 9 on Amendment for	n		
Whidbey Island Bank				
OR 12b. INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INITIAL(S)	Su	FFIX	SPACE IS FOR FILING OFFICE U	ISE ONLY
13. Name of DEBTOR on related financing statement	(Name of a current Debtor of record requi	red for indexing purpases only in s	ome filing offices - see Instruction item	
pne Debtor name (13a or 13b) (use exact, full name; to 7	onit, modify or sobreviate any part of	the Debtor's name); see Instruction	ns if name does not fit	
OR 13b. INDIVIOUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):				
Short Legal Description: PTN LT 1-8, E	BLK 46, MAP OF THE CIT	Y OF ANACORTES		
15. This FINANCING STATEMENT AMENDMENT: covers timber to be cut	ollateral // is filed as a fixture filing described in item 17	and all of Lots 18 thm OF THE CITY OF AN thereof recorded in V 7, records of Skagit O Parcel B: Lot 17, except the Ea Block 46, MAP OF T according to the plat	Jusive, the East 24 feet or ough 20, inclusive, Block NACORTES, according to follower 2 of Plats, pages County, Washington; ast 24 feet thereof, and a HE CITY OF ANACORT thereof recorded in Volumb 7, records of Skagit Co	46, MAP of the plat 4 through
18. MISCELLANEOUS:				W