



\$74.00 1 10:29AM

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS A. NAME & PHOME OF CONTACT AT FILER [optional] Diana Norberg (509) 327-9634 B. E-MAIL CONTACT AT FILER (optional) dianan@upfservices.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) Chronos Mortgage Solutions 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

201506240024 Filed 6/24/2015

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 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 (full or partial): Provide name of assignes in item 3e 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 collaperal in item 8 CONTINUATION: Effectiveness of the Financing Statement identified 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: 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 name This Change affects ___ Debtor or ___ Secured Party of record 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 name (6a or 6b) 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) RATHBUN RICHARD WAYNE 7. CHANGED OR ADDED INFORMATION Complete for Assignment or Party Information Change - provide only give part of the Debtor's name; do not omit, 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 7c. MAILING ADDRESS STATE POSTAL CODE CITY COUNTRY USA DELETE collateral RESTATE covered Collateral ASSIGN collateral. 8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral Indicate 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 As	signment)
	If this is an Amendment authorized by a DEBTOR check here and provide name of authorizing Debtor	All Control of the Co	1 1 some
	9a. ORGANIZATION'S NAME		i In and a second
	Puget Sound Cooperative Credit Union	4	AND THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON NAMED IN COLU
ЭR			# <u></u>

9b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST NAME ADDITIONAL NAME(S)/INITIAL(S)

10. OPTIONAL FILER REFERENCE DATA Chronos Tracking #4687982-39332

SBA Loan #