

FOLI	O FINANCINO CTATEMENT AMENDA		1808200	0157			
FOLI	O FINANCINO OTATEMENE AMENDO	20.10			1808200157		
FOLI	O FINIANOINO OTATELIENE ARIENDI	Ol /		Pages: 1 of 2 Fees:	\$100.00		
4.0	C FINANCING STATEMENT AMENDI	MENT SKAGI	t County Auditor				
I	NAME & PHONE OF CONTACT AT FILER (optional)		1				
D [Nick Barzellone 405-236-0003						
D. E	E-MAIL CONTACT AT FILER (optional)						
C. 8	SEND ACKNOWLEDGMENT TO: (Name and Address)		1				
lΓ	McCoy & Orta, P.C.	\neg					
ı	100 North Broadway, 26th Floor	•					
	Oklahoma City, OK 73102						
H	Charletta Chy, Cit 70102	Į.					
Ľ	_		THE ABOVE SPA	ACE IS FOR FILING OFFICE US	E ONLY		
	NITIAL FINANCING STATEMENT FILE NUMBER 1804160136 filed 4/16/18		(or recorded) in the REA	MENT AMENDMENT is to be filed [f L ESTATE RECORDS Idendum (Form UCC3Ad) and provide De			
2.	TERMINATION: Effectiveness of the Financing Statement identifications.	fied above is terminated w					
3. 🗸	ASSIGNMENT (UD) or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate a	n 7a or 7b, <u>and</u> address of	Assignee in item 7c and name	of Assignor in item 9			
4.	CONTINUATION: Effectiveness of the Financing Statement idea continued for the additional period provided by applicable law	ntified above with respect	to the security interest(s) of Se	cured Party authorizing this Continua	ition Statement is		
5.	PARTY INFORMATION CHANGE:			· ·			
	<u> </u>	Check <u>one</u> of these three bo — CHANGE name and/or a	ddress: CompleteADD na	me: Complete item DELETE name	e: Give record name		
	is Change affects Debtor or Secured Party of record	item 6a or 6b; and item 7	a or 7b and item 7c 7a or 7b		n item 6a or 6b		
J. J.	URRENT RECORD INFORMATION: Complete for Party Information. Ba. ORGANIZATION'S NAME	on Change - provide only g	one name (6a or 6b)				
OR	b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
7. C	HANGED OR ADDED INFORMATION: Complete for Assignment or Pal	rty Information Change - provide o	inly <u>one</u> name (7a or 7b) (use exact, full n	ame; do not omit, modify, or abbreviate any pa	t of the Debtor's name)		
- 1	'a. ORGANIZATION'S NAME CITIBANK N.A., AS TRUSTEE*						
	76. INDIVIDUAL'S SURNAME				·		
ł	INDIVIDUAL'S FIRST PERSONAL NAME						
L							
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX		
7c. M	AILING ADDRESS	ICITY		STATE POSTAL CODE	COUNTRY		
	Greenwich Street, 14th Fl.	New York		NY 10013	USA		
8. 🗌	COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN collateral		
	Indicate collateral:		_		,		
* FC	OR THE REGISTERED HOLDERS OF BANC	OF AMERICA N	MERRILL LYNCH CO	DMMERCIAL MORTGA	GE INC.,		
MUI	TIFAMILY MORTGAGE PASS-THROUGH	CERTIFICATES,	SERIES 2018-KJ20				
9. NA	ME OF SECURED PARTY OF RECORD AUTHORIZING	THIS AMENDMENT: Pr	ovide only one name (9a or 9b) (name of Assignor, if this is an Assignn	nent)		
If t	his is an Amendment authorized by a DEBTOR, check here and and a ORGANIZATION'S NAME	provide name of authorizing	g Debtor				
- 1	FEDERAL HOME LOAN MORTGAGE CORF	PORATION					
	b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
	-						
10. O	PTIONAL FILER REFERENCE DATA: O Ref.: 7489.056 Cascade Meadows (Loan N	No. 501173625) F	FILE WITH SKAGIT	COUNTY WA			

UCC FINANCING STATEMENT AMENDMENT ADDENDUM **FOLLOW INSTRUCTIONS** 11, INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 201804160136 filed 4/16/18 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 128. ORGANIZATION'S NAME FEDERAL HOME LOAN MORTGAGE CORPORATION 12b. INDIVIDUAL'S SURNAME 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 current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit 13a. ORGANIZATION'S NAME CEP III - CASCADE 14, LLC OR 13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S)

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

This Finishionic OTATEMENT ASSESSMENT

13. This Financing Statement Amendment:	117. Description of real estate:
covers timber to be cut covers as-extracted collateral significant filling 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):	Abbreviated Legal: All Units in Building Nos. 1, 2, 3, 4 and 5, inclusive and common Areas, "Cascade Estates Condominium"
	APN: P126859
18. MISCELLANEOUS:	