



201809120088

09/12/2018 03:28 PM Pages: 1 of 2 Fees: \$100.00
Skagit County Auditor

WHEN RECORDED RETURN TO:

Land Title & Escrow
111 E George Hopper
Burlington, WA 98233
01-160512-OE ✓

Land Title and Escrow

DOCUMENT TITLE(S):
UCC Termination

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:
AFN 201607010036

GRANTOR:
B & C REAL ESTATE HOLDINGS, INC., a Washington corporation

GRANTEE:
PATRICIA A DYNES, a single woman

ABBREVIATED LEGAL DESCRIPTION:
Ptn E 1/2 Of NW 1/4 & Ptn NE 1/4, 7-35-4 E W.M.

TAX PARCEL NUMBER(S):
P35914, P35913, P35915, P35920, P35924, 350407-1-008-0008, 350407-1-007-0009, 350407-1-010-0004, 350407-2-002-0002

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
Debbie Payne 360-786-8775

B. E-MAIL CONTACT AT FILER (optional)
Debbie@recordsearch.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Debbie Payne 360-786-8775
Fairchild Record Search
3400 Capitol Boulevard SE, 101
Tumwater WA 98501

Date of Filing : 09/26/2017
Time of Filing : 12:51:00 PM
File Number : 2017-269-4561-7
Lapse Date : 07/01/2021

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
2016-183-2622-7 / 201607010036

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 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. 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 collateral in item 8

4. 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: Debtor or Secured Party of record
AND Check one of these three boxes to:
 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

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)	SUFFIX
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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

7b. INDIVIDUAL'S SURNAME	INDIVIDUAL'S FIRST PERSONAL NAME	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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7c. MAILING ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY
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8. 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, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S SURNAME Dynes	FIRST PERSONAL NAME Patricia	ADDITIONAL NAME(S)/INITIAL(S) A.	SUFFIX
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10. OPTIONAL FILER REFERENCE DATA:
Also of Record under Island County Auditor's File No. 4402756