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03/15/2019 08:31 AM Pages: 1 of 1 Fees: \$99.00

Skagit County Auditor, WA

UCC FINANCING STATEMENT AMENDMEN' FOLLOW INSTRUCTIONS	Т						
A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294							
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com							
C. SEND ACKNOWLEDGMENT TO: (Name and Address)							
1610 08165 CSC							
801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: W	Vashington						
	(Skagit)						
1a. INITIAL FINANCING STATEMENT FILE NUMBER		1		R FILING OFFICE USE ON NOMENT is to be filed [for re			
201504070051 04/07/2015		(or recorded) in the	e REAL ESTATE R		•		
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: AND Check one of these three boxes to: CHANGE name and/or address: CompleteADD name: Complete itemDELETE name: Give record name							
This Change affects Debtor or Secured Party of record litem 6a or 6b; and item 7a or 7b and item 7c 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 NAMERUSS BORNEMAN, D.D.S., P.S.							
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON.	AL NAME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX		
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informati	ion Change - provide c	inly one name (7a or 7b) (use exa	act, full name; do not omi	it, modify, or abbreviate any part of t	he Debtor's name)		
7a. ORGANIZATION'S NAME							
OR 7b. INDIVIDUAL'S SURNAME							
INDIVIDUAL'S FIRST PERSONAL NAME							
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			7		SUFFIX		
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY		
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD) collateral	DELETE collateral	RESTATE CO	vered collateral AS	SIGN collateral		
One(1)Cerec 3 including Cerec 3 acquisition unit and Cerec 3 milling unit, One(1)Sirona Galileos Compact Cone Beam Xray; Cerec AC'w/Omnicam with Cerec MCXL Milling Machine							
Abbreviated legal: Ptn SE 1/4 of SE 1/4, 24-35-1 E W.M. Parcel Number:350124-4-112-0005 Property I.D. NO.:P31890							
Tarosi Nambolioso (21 1 112 secon reporty 1.5. No.	0 1000						
A NAME OF SECURED DARTY OF DECORD AUTHORIZING THIS AN	AENDMENT: D		61.) (
	name of authorizin		or 9b) (name of Assi	ignor, if this is an Assignmen	t)		
9a. ORGANIZATION'S NAMEHeritage Bank							
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON.	AL NAME	ADDITION	IAL NAME(S)/INITIAL(S)	SUFFIX		
10. OPTIONAL FILER REFERENCE DATA: Debtor: RUSS BORNE D.D.S., P.S.	MAN, D.D.	S., P.S 912094	4476 RUSS	BORNEMAN,	1610 0816		

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)