## 201904180027

04/18/2019 10:15 AM Pages: 1 of 1 Fees: \$99.00

Skagit County Auditor, WA

INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S  7c. MAILING ADDRESS  8. COLLATERAL CHANGE: Also check one of these four boxes: A Indicate collateral:  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR check here and pro 9a. ORGANIZATION'S NAME  Puget Sound Cooperative Credit Unio OR 9b. INDIVIDUAL'S SURNAME	THIS AMENDMEN	ting Debtor	STATE POSTAL CODE  RESTATE covered Collateral  9 (9a or 9b) (name of Assignor, if this is	
7c. MAILING ADDITIONAL NAME(S)/INITIAL(S  7c. MAILING ADDRESS  8. COLLATERAL CHANGE: Also check one of lihese four boxes: A Indicate collateral:  9. NAME of SECURED PARTY of RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR check here and proga. ORGANIZATION'S NAME Puget Sound Cooperative Credit Unio	ADD collateral  THIS AMENDMEN  ovide name of authoria	T; Provide only <u>one</u> nami	RESTATE covered Collateral	COUNTRY USA ASSIGN collateral.
To MAILING ADDRESS  8COLLATERAL CHANGE: Also check one of these four boxes:A Indicate collateral:	ADD collateral		RESTATE covered Collateral	COUNTRY USA ASSIGN collateral.
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S  7c. MAILING ADDRESS  8. COLLATERAL CHANGE: Also check one of these four boxes: A		DELETE collateral		COUNTRY USA
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S  7c. MAILING ADDRESS  8. COLLATERAL CHANGE: Also check one of these four boxes: A		DELETE collateral		COUNTRY USA
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S  7c. MAILING ADDRESS  8. COLLATERAL CHANGE: Also check one of these four boxes: A		DELETE collateral		COUNTRY USA
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S  7c. MAILING ADDRESS				COUNTRY USA
				SUFFIX
INDIVIDUAL O FIRST REDOCULAL MAARE				
OR 7b. INDIVIDUAL'S SURNAME				
7a ORGANIZATION'S NAME	v			
KINSLAND  7. CHANGED OR ADDED INFORMATION Complete for Assignment or Party In	CHRIS		. , , , , , , , , , , , , , , , , , , ,	
OR 66. INDIVIDUAL'S SURNAME	FIRST PERSOI	NAI NIANG	ADDITIONAL NAME(S)INITIAL	_(S) SUFFIX
This Change affects Debtor or Secured Party of record item 6  6. CURRENT RECORD INFORMATION: Complete for Party Information 6a. ORGANIZATION'S NAME	6a or 6b; and item 7a Change - provide onl		or 7b, and item 7c to be deli	eted in item 6a or 6b
, CHAN	one of these three bo	lress. Complete AD		name: Give record name
5. PARTY INFORMATION CHANGE:	7			
CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law.		the security interest(s) of S	ecured Party authorizing this Continua	alion Statement is
ASSIGNMENT (full or partial): Provide name of assignee in item 7a or     For partial assignment, complete items 7 and 9 and also indicate affected		Assignee in item 7c, <u>and</u> na	me of Assignor in ilem 9	
<ol> <li>TERMINATION: Effectiveness of the Financing Statement identified at Statement.</li> </ol>	pove is terminated with	h respect to the security into	rest(s) of Secured Party authorizing th	is Termination .
201804160093 Filed 4/16/2018		(or recorded) in the	STATEMENT AMENDMENT is to be fine REAL ESTATE RECORDS nent Addendum (Form UCC3Ad) and provided in the provided	
		-	SPACE IS FOR FILING OFFICE	
Spokane Valley, WA 99216				
Chronos Mortgage Solutions 12410 E. Mirabeau Parkway, Ste 100	·			
dianan@upfservices.com				
•	34			
B. E-MAIL CONTACT AT FILER (optional)		1		
A NAME & PHONE OF CONTACT AT FILER (optional)  Diana Norberg (509) 327-96				
Diana Norberg (509) 327-963	Т			
FOLLOW INSTRUCTIONS A NAME & PHONE OF CONTACT AT FILER (optional) Diana Norberg (509) 327-963	T			
FOLLOW INSTRUCTIONS A NAME & PHONE OF CONTACT AT FILER (optional) Diana Norberg (509) 327-963	<b>T</b>			