201905100056

05/10/2019 11:34 AM Pages: 1 of 2 Fees: \$100.00

Skagit County Auditor, WA

UCC FINANCING STATEMENT AMENDMENT **FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (Optional) B. EMAIL CONTACT AT FILER (Optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) Jonathan J. Lautt, Esquire Troutman Sanders LLP Post Office Box 1122 Richmond, Virginia 23218 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE NUMBER This FINANCING STATEMENT AMENDMENT is to be filed [for 1b. 🗷 record] (or recorded) in the REAL ESTATE RECORDS 201801290081 filed January 29, 2018 2. X TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination 3. ASSIGNMENT (full or partial): Provide name of Assignce in item 7a or 7b, and address of Assignce 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: This Change affects Debtor or Debtor or Debtor or Change Party of record Little 6a or 6b; and item 7a or 7b and item 7c Debtor or 7b, and item 7c De DELETE name: Give record name to be deleted in item 6a or 6b CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6e. ORGANIZATIONS NAME KRE TIGER CREEKSIDE LLC, a limited liability company 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 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) 7e. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SVINITIAL(S) SUFFIX 7c. MAILING ADDRESS STATE POSTAL CODE COUNTRY

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 $f \Box$ and provide name of authorizing Debtor

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral

9a, ORGANIZATION'S NAME

CITIBANK N.A., AS TRUSTEE FOR THE REGISTERED HOLDERS OF GS MORTGAGE SECURITIES
CORPORATION II, MULTIFAMILY MORTGAGE PASS-THROUGH CERTIFICATES, SERIES 2018-KF48, IN ITS
CAPACITY AS NOTE A-1 LENDER AND FOR THE BENEFIT OF THE SERVICED COMPANION LOAN HOLDER

B. BUDDITOLIA 'S SUBMANE BOOK AND THE SERVICE OF TH

☐ DELETE collateral

10. OPTIONAL FILER REFERENCE DATA:

Indicate Collateral:

Creekside (Local – Skagit County, WA) (Operator)

International Association of Commercial Administrators (IACA)

RESTATE covered collateral

ASSIGN collateral

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

	INITIAL FINANCING STATEMENT FILE NUMBER: Same	as item 1a on Amendment form			
	NAME OF PARTY AUTHORIZING THIS AMENDMENT: S	ame as item 9 on Amendment form			
	12a, ORGANIZATION'S NAME CITIBANK N.A., AS TRUSTEE FOR T	HE REGISTERED			
	HOLDERS OF GS MORTGAGE SECU	RITIES CORPORATION			
	II,*				
	12b. INDIVIDUAL'S SURNAME				
	FIRST PERSONAL NAME				
	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
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N	Name of DEBTOR (on related financing statement (Name of a cur	ment Debtor of record required for indexing pur		OVE SPACE IS FOR FILING OFFICE USE n some filing offices – see Instruction Item 13)	
	ne Debtor name (13a or 13b) (use exact, full name; do not omit, mo				
	13a. ORGANIZATION'S NAME				
	13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	ME	ADDITIONAL NAME(S)/INITIAL(S)	SUFF
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18. MISCELLANEOUS: