## 201912230017

12/23/2019 08:34 AM Pages: 1 of 1 Fees: \$103.50

Skagit County Auditor, WA

UCC FINANCING STATEMENT AMENDMENT	
A NAME & PHONE OF CONTACT AT FILER (optional)	
Jen Ely (509) 327-9634  B E-MAIL CONTACT AT FILER (optional)	
Jen.Ely@covius.com	
C. SEND ACKNOWLEDGMENT TO (Name and Address)	
Chronos Mortgage Solutions	
12410 E. Mirabeau Parkway, Ste 100	
Spokane Valley, WA 99216	
	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
la INITIAL FINANCING STATEMENT FILE NUMBER	1b This FINANCING STATEMENT AMENDMENT is to be filed (for record)
201706190107 filed 6/19/2017	(or recorded) in the REAL ESTATE RECORDS Filer aftech Amendment Addendum (Form UCC3Ad) and provide Debtor's name in Rem 13
_	ninated with respect to the security interest(s) of Secured Party authorizing this Terminat on
Statement  B. ASSIGNMENT (full or partial) Provide name of assignee in item 7a or 7b. and a	
For partial assignment, complete items 7 and 9 and also indicate affected collateral  CONTINUATION: Effectiveness of the Financino Statement identified above with	in item 6 In respect to the security interest(s) of Secured Party authorizing this Continuation Statement is
continued for the additional period provided by applicable law	The part of the second part of t
. PARTY INFORMATION CHANGE:	
	se trinse boxes to.  and/or address. Complete ADD name: Complete item DELETE name. Give record na nd item 7a or 7b and item 7a or 7b, and item 7c to be deleted in item 6a or 6b
B. CURRENT RECORD INFORMATION: Complete for Party Information Change - p 6e. ORGANIZATION'S NAME	provide only <u>one</u> name (6a or 6b)
	ST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX CHARD
<ol> <li>CHANGED OR ADDED INFORMATION Complete for Assignment or Party Information Ch</li> <li>ORGANIZATION'S NAME</li> </ol>	range - provide only one name (7a or 7b) (use exact full name; do not omit, modify, or abbreviate any part of the Debtor's
75. INDIVIDUAL'S SURNAME	
INDIVIDUAL S FIRST PERSONAL NAME	
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S	SUFFIX
c. MAILING ADDRESS CITY	STATE POSTAL CODE COUNTRY USA
COLLATERAL CHANGE: Also check one of these four boxes: ADD collete	oralDELETE collateralRESTATE covered CollateralASSIGN collateral
Indicate collaterat	
	ENDMENT Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
9a. ORGANIZATION'S NAME	of sutherizins Deblor
Puget Sound Cooperative Credit Union	
R 96 INDIVIDUAL S SURNAME INDIV	/IDUAL'S FIRST NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
0. OPTIONAL FILER REFERENCE DATA	
Chronos Tracking #6064617-47548 Loan #	SBA Loan #

FILING OFFICE COPY -- UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 04/20/11)