

**UCC FINANCING STATEMENT AMENDMENT**  
FOLLOW INSTRUCTIONS**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

**1a. INITIAL FINANCING STATEMENT FILER NUMBER**

201901220041 filed 1/22/2019

**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.

AND check one of these three boxes to:

This Change affects ☐ Debtor or ☐ Secured Party of record ☐ 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**

Romero

FIRST PERSONAL NAME

Bruce

ADDITIONAL NAME(S)/INITIAL(S)

E

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)

7a. ORGANIZATION'S NAME

**OR 7b. INDIVIDUAL'S SURNAME**

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

**7c. MAILING ADDRESS**

CITY

STATE POSTAL CODE

COUNTRY

USA

**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

Puget Sound Cooperative Credit Union

**OR 9b. INDIVIDUAL'S SURNAME**

INDIVIDUAL'S FIRST NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

**10. OPTIONAL FILER REFERENCE DATA**

Chronos Tracking #6235881-48351

Loan #

SBA Loan #