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Skagit County Auditor, WA

	, ,
UCC FINANCING STATEMENT AMENDMENT	
FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional)	
Diana Norberg (509) 327-9634	
B. E-MAIL CONTACT AT FILER (optional)	İ
Diana.Norberg@covius.c c SEND ACKNOWLEDGMENT TO: (Name and Address)	
C SEND ACKNOWLEDGMENT TO: (Name and Address)	_ _
^I Chronos Mortgage Solutions	[1]
12410 E. Mirabeau Parkway, Ste 100	
Spokane Valley, WA 99216	
	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record]
201601270012 Filed 1/27/2016	(or recorded) in the REAL ESTATE RECORDS Filer; stlach. Amendment Addendum (Form UCC3Ad) — and provide Debtor's name in tiem 13
 TERMINATION: Effectiveness of the Financing Statement identified above is to Statement. 	terminated with respect to the security interest(s) of Secured Party authorizing this Termination
3. ASSIGNMENT (full or partial) Provide name of assignee in item 7a or 7b. and	
For partial assignment, complete items 7 and 9 and also indicate affected collate	ral in item 8 with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is
continued for the additional period provided by applicable law	went teachers on the percently and costs of decrease Learly amounts of the Contentification Statement 12
5. PARTY INFORMATION CHANGE:	
	these three boxes to ADD name: Complete item DELETE name: Give record name
This Change affects Debtor or Secured Party of record item 6e or 6b	; and item 7e or 7b and item 7c 7a or 7b, and item 7c 1e to be deleted in item 6a or 6b
 CURRENT RECORD INFORMATION: Complete for Party Information Change ORGANIZATION'S NAME 	e - provide only <u>one</u> name (6a or 6b)
	IRST PERSONAL NAME ADDITIONAL NAME(S)MINITIAL(S) SUFFIX
	Gregory
7. CHANGED OR ADDED INFORMATION Complete for Assignment of Party Information 7a. ORGANIZATION'S NAME	n 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.
OR :	
7b. INDIVIDUAL'S SURNAME	
INDIVIDUAL'S FIRST PERSONAL NAME	· · · · · · · · · · · · · · · · · · ·
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S	SUFFIX
INDIVIOUS S ADDITIONAL IMARES SHITTIALS	SOFFIA
7c. MAILING ADDRESS CI	ITY STATE POSTAL CODE COUNTRY
	USA
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD col	Illateral DELETE collateral RESTATE covered Collateral ASSIGN collateral
Indicate collateral:	
9 NAME OF SECURED PARTY OF RECORD ALITHORIZING 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 DESTOR check here and provide na	are of authorizing Debtor
9a ORGANIZATION'S NAME Puget Sound Cooperative Credit Union	
78 · · · · · · · · · · · · · · · · · · ·	VDIVIDUAL'S FIRST NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
on the state of th	OFFIX
10. OPTIONAL FILER REFERENCE DATA	
Chronos Tracking #6310133-49012 Loan #	SBA Loan #

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