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Skagit County Auditor, WA

UCC FINANCING STATEMENT AI FOLLOW INSTRUCTIONS	MENUMENI			
A. NAME & PHONE OF CONTACT AT FILER (optional) Joy Wirsch (50)	09) 327-9634			
B. E-MAIL CONTACT AT FILER (optional)	33) 021-3004	***		
joy.wirsch@covius.com	•			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	_	,		
Chronos Mortgage Solution	ns	'		
12410 E. Mirabeau Parkwa	• •			
Spokane Valley, WA 99216	5	,		
			ACE IS FOR FILING OFFICE	
 Initial financing statement file number 201504270078 Filed 4/27/20 	115	(or recorded) in the Rt	TEMENT AMENDMENT is to be fi AL ESTATE RECORDS	
TERMINATION Effectiveness of the Financing S			<u>addendum (Form UCC3Ad) — end provid</u> (s) of Secured Party authorizing th	
Statement.			4 4 1 1 - 1 4	
 ASSIGNMENT (tult or partial): Provide name of a For partial assignment, complete items 7 and 9 and 			Assignor in item 9	
CONTINUATION: Effectiveness of the Financing continued for the additional period provided by appli	g Statement identified above with respe- licable law	ct to the security interest(s) of Secu	ed Party authorizing this Continue	dion Statement is
PARTY INFORMATION CHANGE:			•	
Check one of these two boxes:	AND check one of these thre			
This Change affects Deblor or Secured Party o	of record CHANGE name and/or item 6s or 6b; and item			name: Give record nam eted in item 6a or 6b
68. ORGANIZATION'S NAME OR 66. INDIVIDUAL'S SURNAME		SONAL NAME	ADDITIONAL NAME(S)/INITIA	L(S) SUFFIX
Weyrich	Richa		4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
7. CHANGED OR ADDED INFORMATION Complete	e for Assignment or Party Information Unange - p	lovees cuit. Guill name (19 ot 10! (nas exec	TUR Name, do not only, mostly, or accrevi	and and base of the context is to
7a. ORGANIZATION'S NAME				
SP .				
OR 76. INDIVIDUAL'S SURNAME				
OR 76. INDIVIDUAL'S SURNAME				SUFFIX
75. INDIVIDUAL'S SURNAME INDIVIDUAL S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYMITIAL(S	CITY		STATE POSTAL CODE	
76. INDIVIDUAL'S SURNAME INDIVIDUAL S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S 76. MAILING ADDRESS 8. COLLATERAL CHANGE: Also check some of the		DELETE colladeral	STATE POSTAL CODE	SUFFIX
OR 76. INDIVIDUAL'S SURNAME INDIVIDUAL S FIRST PERSONAL NAME	СПТ	DELETE collateral		SUFFIX COUNTRY USA
75. INDIVIDUAL'S SURNAME INDIVIDUAL S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYMITTAL(S 7C. MAILING ADDRESS 3. COLLATERAL CHANGE: Also check one of the	СПТ	DELETE colladeral		SUFFIX COUNTRY USA
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79. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYMNITIAL(S 70. MAILING ADDRESS 3. COLLATERAL CHANGE: Also check one of the Indicate collateral.	CITY hese four boxes: ADD collateral		RESTATE covered Collateral	SUFFIX COUNTRY USA ASSIGN collateral
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