

**UCC FINANCING STATEMENT AMENDMENT****FOLLOW INSTRUCTIONS****A. NAME & PHONE OF CONTACT AT FILER (optional)**

Joy Wirsch (509) 327-9634

**B. E-MAIL CONTACT AT FILER (optional)**

joy.wirsch@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 FILE NUMBER**

201905130009 FILED 05/13/2019

**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

Ubungen

FIRST PERSONAL NAME

Amy

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):**

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 #6416609-49644

Loan #

SBA Loan #