## 202102080151

02/08/2021 01:46 PM Pages: 1 of 2 Fees: \$104.50

Skagit County Auditor, WA

## UCC FINANCING STATEMENT AMENDMENT

**FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294 B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 2058 22932 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Washington (Skagit) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] 1a. INITIAL FINANCING STATEMENT FILE NUMBER (or recorded) in the REAL ESTATE RECORDS
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 201707070014 07/07/2017 2. 📝 TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination 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 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: AND Check one of these three boxes to: Check one of these two boxes: CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c DELETE name: Give record name to be deleted in item 6a or 6b ADD name: Complete item 7a or 7b, and item 7c This Change affects Debtor or Secured Party of record 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 FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7 a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Deblor'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 POSTAL CODE CITY STATE COUNTRY 8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral All Fixtures located at 1420 ROOSEVELT AVENUE UNIT 5, MOUNT VERNON, WA 98273, in SKAGIT COUNTY, whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing Parcel No: P106645, 4642-000-005-004 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 Heritage Bank OR 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10. OPTIONAL FILER REFERENCE DATA: Debtor: BRADFORD, KATHY YVONNE - 572027343 BRADFORD, KATHY 2058 22932 **YVONNE** 

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

. INITIAL FINANCING STATEMENT FILE NUMBER: S	ame as item 1a on Amendment form			
201707070014 07/07/2017  NAME OF PARTY AUTHORIZING THIS AMENDMEN	T. Companitors Oan Amendment form			
12a. ORGANIZATION'S NAME	1. Same as item 9 on Amendment form	-		
Heritage Bank				
		]		
12b. INDIVIDUAL'S SURNAME		-		
FIRST PERSONAL NAME		-		
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
		THE ABOVE SPA	ACE IS FOR FILING OFFICE	USE ONLY
<ol> <li>Name of DEBTOR on related financing statement (Na one Debtor name (13a or 13b) (use exact, full name; do not one</li> </ol>	ame of a current Debtor of record required for inde	xing purposes only in some	e filing offices - see Instruction item	13): Provide on
13a. ORGANIZATION'S NAME	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	lan	DDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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