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Skagit County Auditor, WA

CC FINANCING STATEMENT AMENDME	
NAME & PHONE OF CONTACT AT FILER (optional) than Sumpter (509) 327-9 E-MAIL CONTACT AT FILER (optional)	9634
than,sumpter@covius.c SEND ACKNOWLEDGMENT TO (Name and Address)	
Chronos Mortgage Solutions 12410 E. Mirabeau Parkway, Ste 16 Spokane Valley, WA 99216	00
_	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
INITIAL FINANCING STATEMENT FILE NUMBER 02001280021 Filed 1/28/2020	1b (tris FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer stack, Amendment Addendum (Form UCCSAd) end provide Debter's name in item.
TERMINATION: Effectiveness of the Financing Statement identifi Statement.	tied above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination
	7a or 7b, <u>and</u> address of Assignee in item 7c, <u>and</u> iname of Assignor in item 9 ffected collateral in item 8
CONTINUATION: Effectiveness of the Financing Statement iden continued for the additional period provided by applicable law.	niffied above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is
PARTY INFORMATION CHANGE:	
This Change affects Debtor or Secured Party of record	item 6a or 6b; and item 7a or 7b and item 7c 7a or 7b, and item 7c to be deleted in item 6a or 6b
This Change affects Debtor or Secured Party of record CURRENT RECORD INFORMATION: Complete for Party Inform 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME	CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c ADD name: Complete item DELETE name. Give record in to be deleted in item 6a or 6b nation Change - provide only one name (6a or 6b) FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
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