## 202203180034

03/18/2022 08:54 AM Pages: 1 of 1 Fees: \$203.50

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)  Diana. Norberg@covius.c				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	_			
Chronos Mortgage Solutions 12410 E. Mirabeau Parkway, Ste 100	'			
Spokane Valley, WA 99216				
			E SPACE IS FOR FILING OFFICE US	
1a. INITIAL FINANCING STATEMENT FILE NUMBER		(or recorded) in	G STATEMENT AMENDMENT is to be filed the REAL ESTATE RECORDS	
201812310027 Filed 12/31/2018 2. TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with		dment Addendum (Form UCC3Ad) and provide De hterest(s) of Secured Party authorizing this T	
Statement.  3. ASSIGNMENT (full or partial): Provide name of assignee in item 7a or 7b, per partial assignment, complete items 7 and 9 and also indicate affected coll	and address of /	Assignee in item 7c, <u>and</u>	name of Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statement identified abortionate for the additional period provided by applicable law.		o the security interest(s) o	f Secured Party authorizing this Continuation	Statement is
5. PARTY INFORMATION CHANGE:				
	of these three b		ADD name: Complete item DELETE nar	ne: Give record name
This Change affects Deblor or Secured Party of record item 6a or 6. CURRENT RECORD INFORMATION: Complete for Party Information Cha			7a or 7b, and item 7c to be deleted	l in item 6a or 6b
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSO		ADDITIONAL NAME(S)/INITIAL(S	SUFFIX
7. CHANGED OR ADDED INFORMATION Complete for Assignment or Party Inform	Beverly		ree exact full name: do not amit modify or abbreviate:	any nart of the Debtor's nam
7. CHANGED OR ADDED INFORMATION Complete for Assignment of Party Inform 7a. ORGANIZATION'S NAME	namon Change - provi	os outh. Offermus (Le or 11) (c	ISS SABLI IIII Maline, do llot villa, thouly, or abus syrae (	by part of the Debtor 3 man
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
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD	D collateral	DELETE collateral	RESTATE covered Collateral	ASSIGN collateral.
Indicate collateral:				
NAME OF SECURED PARTY OF RECORD AUTHORIZING THE It this is an Amendment authorized by a DEBTOR check here and provided the provided by the DEBTOR check here.	HIS AMENDME de name of autho	ENT: Provide only <u>one</u> i prizing Debtor	name (9a or 9b) (name of Assignor, if this is a	in Assignment)
9a ORGANIZATION'S NAME Puget Sound Cooperative Credit Union				
OR 9b. INDIVIDUAL'S SURNAME				
	INDIVIDUAL'S	S FIRST NAME	ADDITIONAL NAME(S)/INITIAL(S	S) SUFFIX
10. OPTIONAL FILER REFERENCE DATA Chronos Tracking #7671380-60758 Loan	; •	S FIRST NAME	ADDITIONAL NAME(S)/INITIAL(S	S) SUFFIX

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