## 202207180019

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Skagit County Auditor, WA

| HOO SINANGNIC OTATEMENT AMENDME   | NIT   |                                |   |                                      |
|---|---|--------------------------------|---|--------------------------------------|
| UCC FINANCING STATEMENT AMENDME FOLLOW INSTRUCTIONS   | IN I  |                                |   |                                      |
| A NAME & PHONE OF CONTACT AT FILER (optional)  Diana Norberg (509) 327-9  | 634   |                                |   |                                      |
| B. E-MAIL CONTACT AT FILER (optional) Diana.Norberg@covius.c  |   |                                |   |                                      |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address)   | I   |                                |   |                                      |
| Chronos Mortgage Solutions  | Ч   |                                |   |                                      |
| 12410 E. Mirabeau Parkway, Ste 10   | 0   |                                |   |                                      |
| Spokane Valley, WA 99216  | ,   |                                |   |                                      |
|   |   | THE ABOVE S                    | PACE IS FOR FILING OFFIC                          | E USE ONLY                           |
| 1a, INITIAL FINANCING STATEMENT FILE NUMBER   | 1b.   | This FINANCING ST              | ATEMENT AMENDMENT is to be<br>REAL ESTATE RECORDS | filed (for record)                   |
| 201807190006 Filed 7/19/2019 2. TERMINATION: Effectiveness of the Financing Statement identifier  | d above is terminated with resp                                     | Filer attach Amendmer          | l Addendum (Form UCC3Ad) and prov                 |                                      |
| Statement.  |   |                                |   |                                      |
| ASSIGNMENT (full or partial): Provide name of assignee in item 74     For partial assignment, complete items 7 and 9 and also indicate affer            |   | ee in item 7c, <u>and</u> name | of Assignor in item 9                             |                                      |
| <ol> <li>CONTINUATION: Effectiveness of the Financing Statement identificant continued for the additional period provided by applicable law.</li> </ol> | fied above with respect to the s                                    | ecurity interest(s) of Sec     | ured Party authorizing this Contin                | uation Statement is                  |
| 5. PARTY INFORMATION CHANGE:  |   |                                |   |                                      |
|   | eck <u>one</u> of these three boxes t<br>HANGE name and/or address: |                                | name: Complete item DELET                         | E name: Give record name             |
| This Change affects Debtor or Secured Party of record its 6. CURRENT RECORD INFORMATION: Complete for Party Informal                                    | em 6a or 6b; and item 7a or 7b                                      |                                | 7b. and item 7c to be d                           | eleled in item 6a or 6b              |
| 6a. ORGANIZATION'S NAME   | don onlingo - provide oray <u>one</u>                               | inality (ou or ou)             |   |                                      |
| OR 6b. INDIVIDUAL'S SURNAME   | : FIRST PERSONAL N  | IAME                           | ADDITIONAL NAME(S)/INITI                          | AL(S) SUFFIX                         |
| Jennings  | Brenda  |                                | į   | 20,100                               |
| 7. CHANGED OR ADDED INFORMATION Complete for Assignment or Pa<br>7a. ORGANIZATION'S NAME  | arty Information Change - provide only                              | one name (7a or 7b) (use ex    | act full name: do not omit, modify, or abbre      | eviate any part of the Debtor's name |
|   |   |                                |   |                                      |
| 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                                  |
| <ol> <li>COLLATERAL CHANGE: <u>Also</u> check <u>one</u> of these four boxes:  </li> </ol> Indicate collateral;   | ADD collateral  | DELETE collateral              | RESTATE covered Collateral                        | ASSIGN collateral.                   |
|   |   |                                |   |                                      |
|   |   |                                |   |                                      |
|   |   |                                |   |                                      |
|   |   |                                |   |                                      |
| 9. NAME OF SECURED PARTY OF RECORD AUTHORIZE  | INC THE AMENDMENT   | Penuido aglu ana nama          | (Do or Dh) (name of Assisser (64)                 |                                      |
| If this is an Amendment authorized by a DEBTOR check here and   | d provide name of authorizing l                                     |                                | (oa or ou) (name of Assignor, if the              | s is an Assignment)                  |
| 9a ORGANIZATION'S NAME Puget Sound Cooperative Credit Ur  |   |                                |   |                                      |
|   | nion  |                                |   |                                      |
| OR 96 INDIVIDUAL'S SURNAME  | nion<br>Individual's Firs   | T NAME                         | ADDITIONAL NAME(S)/INIT                           | VAL(S) SUFFIX                        |
|   |   | T NAME                         | ADDITIONAL NAME(S)/INIT                           | IAL(S) SUFFIX                        |

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