202301200018

01/20/2023 10:29 AM Pages: 1 of 1 Fees: \$203.50

Skagit County Auditor, WA

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS		V I				
A. NAME & PHONE OF CONTACT AT FILER (0	optional)					
3. E-MAIL CONTACT AT FILER (optional)						
C. SEND ACKNOWLEDGMENT TO: (Name an	nd Address)	_				
reQuire Real Estate Solutions, I 5029 Corporate Woods Drive, S Virginia Beach, VA 23462		I				
		1				
a. INITIAL FINANCING STATEMENT FILE NUMBER					R FILING OFFICE USE	
201802280007			(or recorded) in the	he REAL ESTATE F		_
TERMINATION: Effectiveness of the Financial Statement	ing Statement identified abo	ove is terminated w	ith respect to the securi	ty interest(s) of Sec	ured Party authorizing this	Termination
ASSIGNMENT (full or partial): Provide name For partial assignment, complete items 7 and 9			Assignee in item 7c and	name of Assignor	in item 9	
CONTINUATION: Effectiveness of the Finar continued for the additional period provided by	ncing Statement identified a	above with respect	to the security interest(s	s) of Secured Party	authorizing this Continuation	on Statement
PARTY INFORMATION CHANGE:		,				
Check one of these two boxes:		ne of these three bo	xes to:			
		NGE name and/or a		ADD name: Complet	e item DELETE name:	Give record no
This Change affects Debtor or Secured Party	y of record item	6a or 6b; and item 7	ddress: Complete a or 7b <u>and</u> item 7c	ADD name: Comple 7a or 7b, <u>and</u> item 7d	DELETE name: to be deleted in i	
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