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02/01/2023 12:27 PM Pages: 1 of 2 Fees: \$204.50

		Skagit County	Auditor, WA	
OO ENTENDING OTETELENT ASSE	NIDRAENIT			
CC FINANCING STATEMENT AME	NUMENI			
NAME & PHONE OF CONTACT AT FILER (optional)		7		
Andrew Flinspach 405-236-0003				
E-MAIL CONTACT AT FILER (optional)		1		
SENS ASIANSWEED SHELLER AND ALL AND AL		4		
SEND ACKNOWLEDGMENT TO: (Name and Address)	·			
McCoy & Orta, P.C.				
100 North Broadway, 26th Floor				
Oklahoma City, OK 73102				
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_		THE ABOVE SPA	CE IS FOR FILING OFFICE USE	ONLY
INITIAL FINANCING STATEMENT FILE NUMBER 1804160136 filed 4/16/18		(or recorded) in the REAL		
			dendum (Form UCC3Ad) and provide Deb	
✓ TERMINATION: Effectiveness of the Financing Statement Statement	nt identified above is terminated	with respect to the security intere	st(s) of Secured Party authorizing thi	is Terminatio
ASSIGNMENT (full or partial): Provide name of Assigne	e in item 7a or 7b, and address	of Assignee in item 7c and name of	of Assignor in item 9	
For partial assignment, complete items 7 and 9 and also in	dicate affected collateral in item	8	•	
CONTINUATION: Effectiveness of the Financing Staten continued for the additional period provided by applicable [t to the security interest(s) of Sec	ured Party authorizing this Continua	tion Stateme
	aw			
PARTY INFORMATION CHANGE:	AND Check one of these three I	poxes to:		
Check <u>one</u> of these two boxes: This Change affects Debtor or Secured Party of record	CHANGE name and/or item 6a or 6b; and item	address: CompleteADD nar	ne: Complete item DELETE name	: Give record
CURRENT RECORD INFORMATION: Complete for Party			and Relia 75 To be deleted in	r kem od or o
6a. ORGANIZATION'S NAME				
6b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
 CHANGED OR ADDED INFORMATION: Complete for Assignm	nont or Body Information Change Installed	s and s and s areast (7a or 7b) (see asset fill n	mo, do not amit wordify, or abbreviate and nod	of the Debtorb
7a. ORGANIZATION'S NAME	lient of Party Information Change - provide	only <u>one</u> name (7a or 7b) (use exact, full ha	ame; do nut omit, modify, or appreviate any pari	ut the Debtor's i
7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNT
COLLATERAL CHANGE: Also check one of these four b	oxes: ADD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN col
Indicate collateral:				
OR THE REGISTERED HOLDERS OF I	BANC OF AMERICA	MERRILL LYNCH CO	MMERCIAL MORTGA	GE INC.
ILTIFAMILY MORTGAGE PASS-THRO	UGH CERTIFICATES	S, SERIES 2018-KJ20		
NAME OF SECURED PARTY OF RECORD AUTHOR	PIZING THIS AMENDMENT:	Provide only one name (9a or 9h) (name of Assignor if this is an Assignor	nent)
f this is an Amendment authorized by a DEBTOR, check here	and provide name of authoriz		memo vi Assignor, il tilis is ali Assignin	iemy
9a. ORGANIZATION'S NAME				
CITIBANK N.A., AS TRUSTEE*	I	WW NAME	Laboratoria Maria	lau-
9b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
OPTIONAL FILER REFERENCE DATA:				
TIONAL FILER REFERENCE DATA: cade Meadows (Loan No. 501173625)				

201804160136 filed 4/16/18 2. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as its 12a. ORGANIZATION'S NAME CITIBANK N.A., AS TRUSTEE*			
CITIDANIZALA AC TOLICTEE*	em 9 on Amendment form		
CITIBANK N.A., AS TRUSTEE			
R 12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INITIAL(S)			
ADDITIONAL NAME(O)/INTINE(O)	SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE	USE ONLY
3. Name of DEBTOR on related financing statement (Name of a curren		purposes only in some filing offices - see Instruction item	
one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or	abbreviate any part of the Debtor's na	me); see Instructions if name does not fit	
13a. ORGANIZATION'S NAME CEP III - CASCADE 14, LLC			
R 13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(\$)/INITIAL(\$)	SUFFIX
5. This FINANCING STATEMENT AMENDMENT:	17. Description		
covers timber to be cut covers as-extracted collateral is is 8. Name and address of a RECORD OWNER of real estate described in item 1	filed as a fixture filing Abbrevia	ted Legal:	
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18. MISCELLANEOUS: