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Skagit County Auditor, WA

## UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

|                                                                                                                                                                      |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| A. NAME & PHONE OF CONTACT AT FILER (optional)<br>CSC 1-800-858-5294                                                                                                 |  |
| B. E-MAIL CONTACT AT FILER (optional)<br>SPRFiling@cscglobal.com                                                                                                     |  |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address)<br><br>2523 02721<br>CSC<br>801 Adlai Stevenson Drive<br>Springfield, IL 62703<br><br>Filed In: Washington<br>(Skagit) |  |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER  
202105180041 05/18/2021

1b. ☒ This FINANCING STATEMENT AMENDMENT is to be filed [for record]  
(or recorded) in the REAL ESTATE RECORDS  
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. ☒ TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☐ ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☐ CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ PARTY INFORMATION CHANGE:

Check one of these two boxes:

This Change affects ☐ Debtor or ☐ Secured Party of record

AND Check one of these three boxes to:

☐ CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c ☐ ADD name: Complete item 7a or 7b, and item 7c ☐ DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

|                         |                                      |                              |                                         |
|-------------------------|--------------------------------------|------------------------------|-----------------------------------------|
| 6a. ORGANIZATION'S NAME |                                      |                              |                                         |
| OR                      | 6b. INDIVIDUAL'S SURNAME<br>DIETRICH | FIRST PERSONAL NAME<br>BRUCE | ADDITIONAL NAME(S)/INITIAL(S)<br>SUFFIX |

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

|                                            |                          |  |  |
|--------------------------------------------|--------------------------|--|--|
| 7a. ORGANIZATION'S NAME                    |                          |  |  |
| 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 collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral

Indicate collateral:

9 WINDOWS

APN: P17130

The East Half of the Northwest Quarter of the Northwest Quarter of the Southwest Quarter of  
Section' 21, Township 33 North, Range 4 East, W.M.,

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)

If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

|                                                         |                          |                     |                                         |
|---------------------------------------------------------|--------------------------|---------------------|-----------------------------------------|
| 9a. ORGANIZATION'S NAME 1st Security Bank of Washington |                          |                     |                                         |
| OR                                                      | 9b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S)<br>SUFFIX |

10. OPTIONAL FILER REFERENCE DATA: Debtor: DIETRICH, BRUCE-:5151920130 DIETRICH

2523 02721

**UCC FINANCING STATEMENT AMENDMENT ADDENDUM**

FOLLOW INSTRUCTIONS

|                                                                                                           |        |
|-----------------------------------------------------------------------------------------------------------|--------|
| 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form<br>202105180041 05/18/2021 |        |
| 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form                            |        |
| 12a. ORGANIZATION'S NAME<br>1st Security Bank of Washington                                               |        |
| OR                                                                                                        |        |
| 12b. INDIVIDUAL'S SURNAME                                                                                 |        |
| FIRST PERSONAL NAME                                                                                       |        |
| ADDITIONAL NAME(S)/INITIAL(S)                                                                             | SUFFIX |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

|                           |                     |                               |        |
|---------------------------|---------------------|-------------------------------|--------|
| 13a. ORGANIZATION'S NAME  |                     |                               |        |
| OR                        |                     |                               |        |
| 13b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

EXCEPT County Road running along the North line THEREOF.

Situating in Skagit County, Washington;

15. This FINANCING STATEMENT AMENDMENT:

☐ covers timber to be cut ☐ covers as-extracted collateral ☒ is filed as a fixture filing

16. Name and address of a RECORD OWNER of real estate described in item 17  
(If Debtor does not have a record interest):

17. Description of real estate:

APN: P17130

The East Half of the Northwest Quarter of the Northwest  
Quarter of the Southwest Quarter of  
Section' 21, Township 33 North, Range 4 East, W.M.,

EXCEPT County Road running along the North line  
THEREOF.

Situating in Skagit County, Washington;

18. MISCELLANEOUS: