202307210025

07/21/2023 10:05 AM Pages: 1 of 2 Fees: \$204.50

Skagit County Auditor, WA

UCC FINANCING STATEMENT AMENDMENT

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294				
B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		-		
CSC 801 Adlai Stevenson Drive	iled In: Washington			
Springfield, IL 62703	(Skagit)			
SEE BELOW FOR SECURED PARTY CONTACT INF			PACE IS FOR FILING OFFICE USE	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 201209170117 09/17/2012		(or recorded) in the REA	EMENT AMENDMENT is to be filed [for recont in the control of the c	ord] ment Addendum
2. TERMINATION: Effectiveness of the Financing Statement identified	above is terminated with resp	ect to the security interest(s) of	Secured Part(y)(ies) authorizing this Termin	ation Statement
ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and add For partial assignment, complete items 7 and 9; check ASSIGN Collate				
CONTINUATION: Effectiveness of the Financing Statement identifier additional period provided by applicable law	ed above with respect to the s	ecurity interest(s) of Secured Pa	arty authorizing this Continuation Statement	is continued for the
5. PARTY INFORMATION CHANGE:				
Check one of these two boxes:	Check one of these three box			
This Change affects Debtor or Secured Party of record	CHANGE name and/or a item 6a or 6b; and item 7	a or 7b <u>and</u> item 7c7a or	name: Complete item DELETE name: 7b, <u>and</u> item 7c to be deleted in	Give record name item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information Ga. ORGANIZATION'S NAME	ion Change - provide only one	name (6a or 6b)		
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
IDLACK				
BLACK	DIETRICH	1	E	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part			_	ebtor's name)
			_	ebtor's name)
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part			_	ebtor's name)
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME			_	ebtor's name)
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7a. ORGANIZATION'S NAME			_	ebitor's name)
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME			_	ebtor's name)
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			ne; do not omit, modify, or abbreviate any part of the D	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME			_	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	ty Information Change - provide only		ne; do not omit, modify, or abbreviate any part of the D	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part. 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Check only one box: Indicate collateral:	ly Information Change - provide only CITY ADD collateral	one name (7a or 7b) (use exact, full name name (7a or 7b) (use exact, full name name name name name name name name	ne; do not omit, modify, or abbreviate any part of the D	SUFFIX COUNTRY ASSIGN* collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part. 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Check only one box: Indicate collateral: ROOFING	ly Information Change - provide only CITY ADD collateral	one name (7a or 7b) (use exact, full name name (7a or 7b) (use exact, full name name name name name name name name	ne; do not omit, modify, or abbreviate any part of the D STATE POSTAL CODE RESTATE covered collateral	SUFFIX COUNTRY ASSIGN* collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Check only one box: Indicate collateral: ROOFING PARCEL NUMBER: P62540 LEGAL DESCRIPTION: TAX 25: DK 12: THE WES	CITY ADD collateral *Check ASSIGN COLLATERAL o	DELETE collateral	STATE POSTAL CODE RESTATE Covered collateral record is limited to certain collateral and describe the	SUFFIX COUNTRY ASSIGN* collateral
7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Check only one box: Indicate collateral: ROOFING PARCEL NUMBER: P62540 LEGAL DESCRIPTION: TAX 25: DK 12: THE WES'BURLINGTON, DESCRIBED AS FOLLOWS: BEGII	CITY ADD collateral *Check ASSIGN COLLATERAL of NNING AT A POINT	DELETE collateral JUDICATE TO THE STATE OF	STATE POSTAL CODE RESTATE covered collateral record is limited to certain collateral and describe the REAGE, CITY OF OF THE SOUTHWEST	SUFFIX COUNTRY ASSIGN* collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Check only one box: Indicate collateral: ROOFING PARCEL NUMBER: P62540 LEGAL DESCRIPTION: TAX 25: DK 12: THE WES	CITY CITY ADD collateral *Check ASSIGN COLLATERAL of NNING AT A POINT ONG THE RIGHT-O	DELETE collateral DELETE collateral in the assignee's power to amend the collateral power to a mend the collateral power t	STATE POSTAL CODE RESTATE Covered collateral record is limited to certain collateral and describe the REAGE, CITY OF OF THE SOUTHWEST CTION STREET, A	SUFFIX COUNTRY ASSIGN* collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7. Ta. ORGANIZATION'S NAME 7. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7. MAILING ADDRESS 8. COLLATERAL CHANGE: Check only one box: Indicate collateral: ROOFING PARCEL NUMBER: P62540 LEGAL DESCRIPTION: TAX 25: DK 12: THE WES' BURLINGTON, DESCRIBED AS FOLLOWS: BEGIL CORNER OF SAID LOT 38; THENCE NORTH ALC DISTANCE OF 120 FEET; THENCE EAST A DISTA	CITY ADD collateral *Check ASSIGN COLLATERAL of NNING AT A POINT ONG THE RIGHT-OANCE OF 115 FEET	DELETE collateral DELETE collateral Inly if the assignee's power to amend the collateral power to a mend the collateral po	STATE POSTAL CODE RESTATE covered collateral record is limited to certain collateral and describe the SEAGE, CITY OF OF THE SOUTHWEST CTION STREET, A	SUFFIX COUNTRY ASSIGN* collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part. 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Check only one box: Indicate collateral: ROOFING PARCEL NUMBER: P62540 LEGAL DESCRIPTION: TAX 25: DK 12: THE WES'BURLINGTON, DESCRIBED AS FOLLOWS: BEGIL CORNER OF SAID LOT 38; THENCE NORTH ALCORISTANCE OF 120 FEET; THENCE EAST A DISTATED.	CITY ADD collateral *Check ASSIGN COLLATERAL o T HALF OF LOT 38 NNING AT A POINT ONG THE RIGHT-O ANCE OF 115 FEE	DELETE collateral DELETE collateral Inly if the assignee's power to amend the control of the c	STATE POSTAL CODE RESTATE covered collateral record is limited to certain collateral and describe the SEAGE, CITY OF OF THE SOUTHWEST CTION STREET, A	SUFFIX COUNTRY ASSIGN* collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7. Ta. ORGANIZATION'S NAME 7. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7. MAILING ADDRESS 8. COLLATERAL CHANGE: Check only one box: Indicate collateral: ROOFING PARCEL NUMBER: P62540 LEGAL DESCRIPTION: TAX 25: DK 12: THE WES' BURLINGTON, DESCRIBED AS FOLLOWS: BEGIL CORNER OF SAID LOT 38; THENCE NORTH ALC DISTANCE OF 120 FEET; THENCE EAST A DISTA	CITY ADD collateral *Check ASSIGN COLLATERAL o T HALF OF LOT 38 NNING AT A POINT DNG THE RIGHT-O ANCE OF 115 FEET THIS AMENDMENT: Provious rouse of authorizing D	DELETE collateral DELETE collateral Inly if the assignee's power to amend the control of the c	STATE POSTAL CODE RESTATE covered collateral record is limited to certain collateral and describe the SEAGE, CITY OF OF THE SOUTHWEST CTION STREET, A	SUFFIX COUNTRY ASSIGN* collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part. 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Check only one box: Indicate collateral: ROOFING PARCEL NUMBER: P62540 LEGAL DESCRIPTION: TAX 25: DK 12: THE WES' BURLINGTON, DESCRIBED AS FOLLOWS: BEGIL CORNER OF SAID LOT 38; THENCE NORTH ALC DISTANCE OF 120 FEET; THENCE EAST A DISTA 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING 1 If this is an Amendment authorized by a DEBTOR, check here and polygon. ORGANIZATION'S NAME 1st Security Bank of Was	CITY ADD collateral *Check ASSIGN COLLATERAL of Check ASSIGN THE RIGHT-ONG THE RIGHT-	DELETE collateral DELETE collateral Inly if the assignee's power to amend the control of the c	STATE POSTAL CODE RESTATE covered collateral record is limited to certain collateral and describe the CEAGE, CITY OF OF THE SOUTHWEST CTION STREET, A E SOUTH BOUNDARY OF ame of Assignor, if this is an Assignment)	SUFFIX COUNTRY ASSIGN* collateral collateral in Section 8
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part. 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Check only one box: Indicate collateral: ROOFING PARCEL NUMBER: P62540 LEGAL DESCRIPTION: TAX 25: DK 12: THE WES: BURLINGTON, DESCRIBED AS FOLLOWS: BEGII CORNER OF SAID LOT 38; THENCE NORTH ALC DISTANCE OF 120 FEET; THENCE EAST A DISTANCE OF 120 FEET; THENCE EAST A DISTANCE OF SECURED PARTY OF RECORD AUTHORIZING 1 If this is an Amendment authorized by a DEBTOR, check here and piggs. ORGANIZATION'S NAME 1st Security Bank of Was	CITY ADD collateral *Check ASSIGN COLLATERAL o T HALF OF LOT 38 NNING AT A POINT DNG THE RIGHT-O ANCE OF 115 FEET THIS AMENDMENT: Provious rouse of authorizing D	DELETE collateral DELETE collateral Inly if the assignee's power to amend the control of the c	STATE POSTAL CODE RESTATE covered collateral record is limited to certain collateral and describe the SEAGE, CITY OF OF THE SOUTHWEST CTION STREET, A	SUFFIX COUNTRY ASSIGN* collateral

IL NOTICE, PROMOTION STATEMENT FILE NUMBER: Same as ten to or Amendment form 201/2009/17/01/2017/2017/2017 2 NAME OF PROFTY AUTHORIZMS THIS AMENOMENT. Same as item 5 or Amendment form 150, DEPARTMENT FILE NUMBER: Same as item 5 or Amendment form 151, DEPARTMENT AND THE SAME OF Washington 152, INDIVIDUAL'S SUPPAULE PRIST PERSONAL NAME ADDITIONAL PRINCE SUPPAULE ADDITIONAL PRINCE SUPPAULE ADDITIONAL SUPPAULE PRIST PERSONAL NAME ADDITIONAL SUPPAULE BLACK BURNOLUTY ADDITIONAL SUPPAULE BLACK BURNOLUTY ADDITIONAL SAME FOR (CHECK ONE BOX) ITEM 8 (Collaboration on The Collaboration on The Report Addition of The Collaboration on The Report Addition of The West State Out The West Sta				
2 ANALIS PRAFTY ALTHORIZING THIS AMENDMENT. Same as larn 9 on Amendment form 12 DEGRADATIONS NAME 12 INDIVIDUALS SUPPAGE FREST PERSONAL NAME PROTECTION of related financing statement (same of a current Oerbor of record recurrent for inhering purposes only in store through office - see instruction from 15). Provides only as of the financing statement (same of a current Oerbor of record recurrent for inhering purposes only in store through office - see instruction from 15). Provides only as of the financing statement (same of a current Oerbor of record recurrent for inhering purposes only in store through office - see instruction from 15). Provides only as of the financing statement (same of a current Oerbor of record recurrent for inhering purposes only in store through office - see instruction from 15). Provides only as of the financing of		ne as item 1a on Amendment form		
18. Security Bank of Washington 12. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)NINTIAL(6) 3. Name of DEBTOR on related financing statement (Name of a current Debtor of record require for indexing purposes only in some filling effices - see Instruction sem 13): Provide only age Debtor rame (18 or 19) (see exist. All name; 50 not onli, modify, or abbreviate any pain of the Debtor's name); see Instructions of name does not 6: 13. INDIVIDUAL'S SURNAME BLACK A ADDITIONAL SPACE FOR (CHECK ONE BOX): IV ITEM 8 (Collational) OR THER INFORMATION (Please Describe) SAID LOT 38: THENCE SOUTH A DISTANCE OF 120 FEET, MORE OR LESS, PARALLEL TO THE WEST BOUNDARY OF SAID LOT 38: THENCE WEST A DISTANCE OF 115 FEET, MORE OR LESS, PARALLEL TO THE SOUTH BOUNDARY OF SAID LOT 38: THENCE WEST A DISTANCE OF 115 FEET, MORE OR LESS, PARALLEL TO THE SOUTH BOUNDARY OF SAID LOT 38: THENCE WEST A DISTANCE OF 115 FEET, MORE OR LESS, PARALLEL TO THE SOUTH BOUNDARY OF SAID LOT 38: THENCE WEST A DISTANCE OF 115 FEET, MORE OR LESS, PARALLEL TO THE SOUTH BOUNDARY OF SAID LOT 38: THENCE WEST A DISTANCE OF 115 FEET, MORE OR LESS, PARALLEL TO THE SOUTH BOUNDARY OF SAID LOT 38: THENCE WEST A DISTANCE OF 115 FEET, MORE OR LESS, PARALLEL TO THE SOUTH BOUNDARY OF SAID LOT 38: THENCE WEST A DISTANCE OF 115 FEET, MORE OR LESS, PARALLEL TO THE WEST OF THE SAID O		Same as item 9 on Amendment form		
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 3. Name of DEBTOR on related financing statement (Name of a current Debtor of record receard for indicate) purposes only in same filing office—see inflanction seen 13; Provide only see Debtor water (10 or 10b) (see record. All remains for cords, endry), or abdressite sey part of the Debtor's frame); see financiation of ream 13; Provide only see Debtor water (10 or 10b) (see record. All remains for cords, endry), or abdressite sey part of the Debtor's frame); see financiation of remains does not filing office—see inflanction seen 13; Provide only see Debtor water (10 or 10b) (see record. All remains for cords, endry), or abdressite sey part of the Debtor's frame); see financiation of remains does not filing office—see inflanction seen 13; Provide only see Debtor seen (10 or 10b) (see record. All remains for cords, endry), or abdressite sey part of the Debtor's frame); see financiation of remains does not filing office—see inflanction seen 13; Provide only see financiation of remains does not filing office. 15	12a. ORGANIZATION'S NAME			
FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) 3. Name of DEBTOR on related financing statement (Name of a current Debtor of record sequeled for indexing purposes only in some tiling offices - see Instruction from 13). Provide only asso Before name (13a or 13b) uses exact, full name; do not omit, modify, or abherevate any part of the Debtor's name), see Instructions if name does not fit. 13a. DROANUZATION'S NAME 13b. DROANUZATION'S NAME 13c. DROANUZ	1st Security Bank of Washington			
FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) 3. Name of DEBTOR on related financing statement (Name of a current Debtor of record sequeled for indexing purposes only in some tiling offices - see Instruction from 13). Provide only asso Before name (13a or 13b) uses exact, full name; do not omit, modify, or abherevate any part of the Debtor's name), see Instructions if name does not fit. 13a. DROANUZATION'S NAME 13b. DROANUZATION'S NAME 13c. DROANUZ				
ADDITIONAL NAME(s)INSTAL(S) 3. Name of DEBTOR on related financing statement (Name of a current Debtor of record included for indexing purposes only in some fling offices - see Instruction tern 13): Provide only one debtor name (13s or 13b) (use oract, full name; do not omit, mostly, or abbreviate any part of the Debtor's name); see Instructions # name does not fit in 3b. Provide only one of the Debtor's name; does not fit in 3b. Provide only one o	DR 12b. INDIVIDUAL'S SURNAME			
ADDITIONAL NAME(s)INSTAL(S) 3. Name of DEBTOR on related financing statement (Name of a current Debtor of record included for indexing purposes only in some fling offices - see Instruction tern 13): Provide only one debtor name (13s or 13b) (use oract, full name; do not omit, mostly, or abbreviate any part of the Debtor's name); see Instructions # name does not fit in 3b. Provide only one of the Debtor's name; does not fit in 3b. Provide only one o	EIDST DEDSONIAL NAME			
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 3. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indicing purposes only in some filting offices - see Instruction (tern 13). Provide only gas Debtor name (13s or 13s) (see exact, full name, do not only, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fill 13s. ORGANIZATIONS NAME 13s. BONIZATIONS NAME	THIST ENGOVALIVANCE			
3. Name of DEBTOR on rollade financing statement, (Name of a current Debtor of record required for indexing purposes only in some filling offices - see Instruction Item 13). Provide only and Debtor name (13s or CASALTONS NAME Table INDIVIDUAL'S SURNAME PIRST PERSONAL NAME ADDITIONAL NAME(SylINTIAL(S)) SUFFIX	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
age Debtor name (13a of 13b) (see seath, full name, do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit Table Royalization's NAMIE				
13b. INDIVIDUAL'S SURMAME BLACK 13c. INDIVIDUAL'S SURMAME BLACK 4. ADDITIONAL SPACE FOR (CHECK ONE BOX): 17c. ITEM 8 (Collateral) or OTHER INFORMATION (Please Describe) SAID LOT 38; THENCE SOUTH A DISTANCE OF 120 FEET, MORE OR LESS, PARALLEL TO THE WEST BOUNDARY OF SAID LOT 38; THENCE WEST A DISTANCE OF 115 FEET, MORE OR LESS, PARALLEL TO THE SOUTH BOUNDARY OF SAID LOT 38 TO POINT OF BEGINNING SKAGIT COUNTY, WASHINGTON 15. This FINANCING STATEMENT AMENDMENT: Covers simbler to be out covers as-estimated collisional				ovide only
S. This FINANCING STATEMENT AMENDMENT: Covers is not and address of a RECORD ONNERS of real estate discribed in tem 17	13a. ORGANIZATION'S NAME			
S. This FINANCING STATEMENT AMENDMENT: Covers is not and address of a RECORD ONNERS of real estate discribed in tem 17				
4. ADDITIONAL SPACE FOR (CHECK ONE BOX):	13B. INDIVIDUAL S SURNAME			SUFFIX
SAID LOT 38; THENCE SOUTH A DISTANCE OF 120 FEET, MORE OR LESS, PARALLEL TO THE WEST BOUNDARY OF SAID LOT 38; THENCE WEST A DISTANCE OF 115 FEET, MORE OR LESS, PARALLEL TO THE SOUTH BOUNDARY OF SAID LOT 38 TO POINT OF BEGINNING SKAGIT COUNTY, WASHINGTON 15. This FINANCING STATEMENT AMENDMENT:				
covers timber to be cut covers as-extracted collateral is filed as a fixture filing l6. Name and address of a RECORD OWNER of real estate described in Item 17 (if Debtor does not have a record interest):				
covers timber to be cut covers as-extracted collateral is filed as a fixture filing l6. Name and address of a RECORD OWNER of real estate described in Item 17 (if Debtor does not have a record interest):				
6. Name and address of a RECORD OWNER of real estate described in Item 17 (if Debtor does not have a record interest):	5 This EINANOING STATEMENT AMENIMENT	17 Description of		
	_		real estate:	
	covers timber to be cut covers as-extracted collaters 6. Name and address of a RECORD OWNER of real estate describ-	al 🗾 is filed as a fixture filing	real estate:	
	covers timber to be cut covers as-extracted collaters 6. Name and address of a RECORD OWNER of real estate describ-	al 🗾 is filed as a fixture filing	real estate:	
	covers timber to be cut covers as-extracted collaters 6. Name and address of a RECORD OWNER of real estate describ-	al 🗾 is filed as a fixture filing	real estate:	
	covers timber to be cut covers as-extracted collaters 6. Name and address of a RECORD OWNER of real estate describ-	al 🗾 is filed as a fixture filing	real estate:	
	covers timber to be cut covers as-extracted collaters 6. Name and address of a RECORD OWNER of real estate describ-	al 🗾 is filed as a fixture filing	real estate:	
	covers timber to be cut covers as-extracted collaters 6. Name and address of a RECORD OWNER of real estate describ-	al 🗾 is filed as a fixture filing	real estate:	
A MARKET ANERGUS	covers timber to be cut covers as-extracted collaters 6. Name and address of a RECORD OWNER of real estate describ-	al 🗾 is filed as a fixture filing	real estate:	
A MIRATIL MITALIA	covers timber to be cut covers as-extracted collaters 6. Name and address of a RECORD OWNER of real estate describ-	al 🗾 is filed as a fixture filing	real estate:	
	covers timber to be cut covers as-extracted collaters 6. Name and address of a RECORD OWNER of real estate describ-	al 🗾 is filed as a fixture filing	real estate:	

FILING OFFICE COPY = UCC FINANCING STATEMENT AMENDMENT ADDENDUM (Form UCC3Ad) (Rev. 07/01/23)