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09/28/2023 11:20 AM Pages: 1 of 2 Fees: \$204.50 Skagit County Auditor, WA

UCC FINANCING STATEMENT AMEND FOLLOW INSTRUCTIONS	MENT					
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294		1				
B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		1				
2657 93294 CSC						
901 Adlai Stayanaan Driva	ed In: Washington (Skagit)					
SEE BELOW FOR SECURED PARTY CONTACT INF	ORMATION	THE ABOVE S	SPACE IS FOR FILII	NG OFFICE USE (ONLY	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 202209130080 09/13/2022	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 res	pect to the security interest(s) of	Secured Part(y)(ies) au	thorizing this Termina	ition Statement	
ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and add For partial assignment, complete items 7 and 9; check ASSIGN Collate			3			
4. CONTINUATION: Effectiveness of the Financing Statement identifies additional period provided by applicable law	d above with respect to the	security interest(s) of Secured P	arty authorizing this Cor	ntinuation Statement i	s continued for the	
5. PARTY INFORMATION CHANGE:						
Check one of these two boxes:	Check one of these three bo		name: Complete item	DELETE name:	Give record name	
This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information	item 6a or 6b; and item	7a or 7b <u>and</u> item 7c7a or	7b, and item 7c	to be deleted in i		
6a. ORGANIZATION'S NAME	on Change - provide only on	e name (ba or bb)				
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAI NAME	ADDITIONAL NA	ME(S)/INITIAL(S)	SUFFIX	
Robertson	Timothy			(-,(-,		
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party	/ Information Change - provide only	one name (7a or 7b) (use exact, full name	ne; do not omit, modify, or ab	breviate any part of the De	btor'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 POSTA	AL CODE	COUNTRY	
COLLATERAL CHANGE: <u>Check only one box:</u>	ADD collateral	DELETE collateral	RESTATE covered of	collateral	ASSIGN* collateral	
Indicate collateral:	*Check ASSIGN COLLATERAL	only if the assignee's power to amend the	e record is limited to certain c	ollateral and describe the c	ollateral in Section 8	
Roof						
APN: P118848 LEGAL: LOT 12, 'AMENDED CEDAR GLEN PLAT".	AS RECORDED I	FEBRUARY 21, 2002.	. UNDER SKAG	SIT COUNTY		
AUDITOR'S FILE NO. 200202210051.						
	ovide name of authorizing D		ame of Assignor, if this	is an Assignment)		
^{9a. ORGANIZATION'S NAME} 1st Security Bank of Was	hington					
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIONAL NA	ME(S)/INITIAL(S)	SUFFIX	
10. OPTIONAL FILER REFERENCE DATA: :5152274510 Ro	bertson "Debtor"					
					2657 9329	

UCC FINANCING STATEMENT AMENDMENT ADD FOLLOW INSTRUCTIONS	ENDUM					
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 202209130080 09/13/2022						
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment for	orm .					
12a. ORGANIZATION'S NAME 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 requ	ired 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 1 13a. ORGANIZATION'S NAME	the Debtor's name); see Instructions if name does not fit					
OR 13b. INDIVIDUAL'S SURNAME FIRST PERS Loida	SONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX					
14. ADDITIONAL SPACE FOR (CHECK ONE BOX): ITEM 8 (Collateral) OR	OTHER INFORMATION (Please Describe)					
15. This FINANCING STATEMENT AMENDMENT:	17. Description of real estate					
covers timber to be cut covers as-extracted collateral filling 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: LOT 12, 'AMENDED CEDAR GLEN PLAT", AS RECORDED FEBRUARY 21, 2002, UNDER SKAGIT COUNTY AUDITOR'S FILE NO. 200202210051.					
18. MISCELLANEOUS: Fixture Filing						

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