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02/27/2025 08:31 AM Pages: 1 of 2 Fees: \$304.50

Skagit County Auditor, WA

		g, /		
UCC FINANCING STATEMENT AMENDMENT	Γ			
FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional) Loan Servicing]		
B. E-MAIL CONTACT AT FILER (optional)		1		
loanservicing@craft3.org				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		ł		
Craft3				
P.O. Box 530233	•			
Atlanta, Georgia 30353-0233				
			CE IS FOR FILING OFFICE USE (
1a. INITIAL FINANCING STATEMENT FILE NUMBER 202004130062	,	(or recorded) in the REAL	IENT AMENDMENT is to be filed [for ESTATE RECORDS endum (Form UCC3Ad) <u>and</u> provide Debto	
TERMINATION: Effectiveness of the Financing Statement identified above Statement	is terminated w	ith respect to the security interes	t(s) of Secured Party authorizing this	Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, For partial assignment, complete items 7 and 9 and also indicate affected co			Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statement identified abountinued for the additional period provided by applicable law	ove with respect	to the security interest(s) of Secu	red Party authorizing this Continuation	on Statement is
5 DARTY INFORMATION CHANCE.				
5. PARTY INFORMATION CHANGE: Check one of those burn boxes: AND Check one	of these three bo	ixes to:		
Check one of these two boxes.	E name and/or a	ddress: CompleteADD nam	e: Complete itemDELETE name: and item 7cto be deleted in i	Give record name
6. CURRENT RECORD INFORMATION: Complete for Party Information Change			aliq item 70to be deleted in i	terri da di du
6a. ORGANIZATION'S NAME	e - provide only	name (oa or ob)		
OR 8b INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informatio 7a. ORGANIZATION'S NAME	n Change - provide o	nly <u>one</u> name (7a or 7b) (use exact, full nar	l me; do not omit, modify, or abbreviate any part o	f the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
MONIBORDO I MONI ENCOUNCE IN MILE				
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 Ri	ESTATE covered collateral	SSIGN collateral
Indicate collateral:				
	IENDMENT: Pame of authorizing		ame of Assignor, if this is an Assignme	nt)
9a. ORGANIZATION'S NAME				
Craft3				
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

DEBTOR: Reed, Gano Reed, Judy Ln#SP-22680

UCC-3

UCC FINANCING STATEMENT AME FOLLOW INSTRUCTIONS	ENDMENT ADDENDUM		
11. INITIAL FINANCING STATEMENT FILE NUMBER: 58	ame as item 1a on Amendment form		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT	: Same as item 9 on Amendment form		
12a. ORGANIZATION'S NAME Craft3			
OR			
12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INITIAL(S)		THE ABOVE SPACE IS FOR FILING OFFICE U	JSE ONLY
13. Name of DEBTOR on related financing statement (Namone Debtor name (13a or 13b) (use exact, full name; do not on			13): Provide only
13a. ORGANIZATION'S NAME			
OR 136 INDIVIDUAL'S SHRNAME Reed	FIRST PERSONAL NAME Gano	ADDITIONAL NAME(S)/INITIAL(S) Scott	SUFFIX
45 THE SHANDON OF A TEMPER THE PARTY.	laz n		
15. This FINANCING STATEMENT AMENDMENT:		on of real estate:	
covers timber to be cut covers as-extracted collater 16. Name and address of a RECORD OWNER of real estate description (if Debtor does not have a record interest):	Septic sys LOCATE SKAGIT, LOOP, BI OWNED TAX ASS SAME PF 1982 RID PARK NO	18818 FISHERMAN'S LOOP, BURLINGTON, VITEM REPAIR OF REPAIR OF WASHINGTON, OF WITH A SITUS ADDRESS OF 18818 FIS URLINGTON, WA 98233-5001 CURREN BY REED GANO SCOTT/REED JUDY MESSOR NUMBER OF P68739 AND BEIN ROPERTY MORE FULLY DESCRIBED AS GEWOOD 70X14 VIN# 09L18147; \$AMID 1 LOT 53 DATED AND RECORDED.	F LAND COUNTY O SHERMANS ITLY M HAVING IG THE S INC M/H
18 MISCELLANEOUS:			