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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)		1		
3194 17897				
csc	Į			
801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Washington			
Laplace Lapl	(Skagit)			
SEE BELOW FOR SECURED PARTY CONTACT I	INFORMATION	THE ABOVE	E SPACE IS FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER		1b. This FINANCING ST	ATEMENT AMENDMENT is to be filed [for reconstructed] REAL ESTATE RECORDS. Filer: attach Amend	ord] ment Addendum
202203180045 03/18/2022		(Form UCC3Ad) and	provide Debtor's name in item 13.	
2. TERMINATION: Effectiveness of the Financing Statement identification	ied above is terminated with res	pect to the security interest(s)	of Secured Part(y)(ies) authorizing this Termin	ation Statement
3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and				
For partial assignment, complete items 7 and 9; check ASSIGN Coll				
CONTINUATION: Effectiveness of the Financing Statement iden additional period provided by applicable law	tified above with respect to the	security interest(s) of Secured	d Party authorizing this Continuation Statement	is continued for the
5. PARTY INFORMATION CHANGE:				
	ND Check one of these three bo			
This Change affects Debtor or Secured Party of record	CHANGE name and/or item 6a or 6b; and item	7a or 7b <u>and</u> item 7c7a	DD name: Complete item DELETE name: or 7b, and item 7c DELETE name:	Give record name item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Inform 6a. ORGANIZATION'S NAME	nation Change - provide only on	aname (6a or 6b)		
ba. ORGANIZATION S NAME				
OR 66. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Sorsdahl	Douglas		P	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or R	Party Information Change - provide only	one name (7a or 7h) (use evact full		
	runy montanen originge provide only	Offic Hairie (ra of rb) (dae exact, fall	name; do not omit, modify, or abbreviate any part of the D	ebtor's name)
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OR	and the state of t	Site Hallie (va of va) (dae exact, full	name; do not omit, modify, or abbreviate any part of the D	ebtor's name)
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OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	CITY ADD collateral	DELETE collateral	STATE POSTAL CODE	SUFFIX COUNTRY ASSIGN* collateral
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:	CITY ADD collateral	DELETE collateral	STATE POSTAL CODE RESTATE covered collateral	SUFFIX COUNTRY ASSIGN* collateral
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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: Roof APN: P66833 LEGAL DESCRIPTION: LAKE CAVENAUGH SUB DIVISION 3; THAT PO	CITY ADD collateral *Check ASSIGN COLLATERAL	DELETE collateral only if the assignee's power to amend	STATE POSTAL CODE RESTATE covered collateral d the record is limited to certain collateral and describe the	SUFFIX COUNTRY ASSIGN* collateral
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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: Roof APN: P66833 LEGAL DESCRIPTION: LAKE CAVENAUGH SUB DIVISION 3; THAT PO BEGINNING AT A POINT ON THE EASTERLY LI SOUTHEASTERLY CORNER OF SAID LOT 56;	CITY ADD collateral *Check ASSIGN COLLATERAL RTION OF LOTS 56 INE OF SAID LOT 56 THENCE SOUTHWE	DELETE collateral only if the assignee's power to amend the assignee's power the assignee's power to amend the assignee's powe	STATE POSTAL CODE RESTATE covered collateral the record is limited to certain collateral and describe the DESCRIBED AS FOLLOWS; NORTHERLY OF THE SOUTHWEST CORNER OF	SUFFIX COUNTRY ASSIGN* collateral
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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: Roof APN: P66833 LEGAL DESCRIPTION: LAKE CAVENAUGH SUB DIVISION 3; THAT PO BEGINNING AT A POINT ON THE EASTERLY LI SOUTHEASTERLY CORNER OF SAID LOT 56; 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and 19a. ORGANIZATION'S NAME 1st Security Bank of Water 19a. ORGANIZATION'S NAME 19a. ORGANIZ	CITY ADD collateral *Check ASSIGN COLLATERAL *RTION OF LOTS 56 INE OF SAID LOT 56 THENCE SOUTHWE	DELETE collateral nnly if the assignee's power to amend AND 57. BLOCK 1 WHICH IS 27 FT STERLY TO THE S vide only one name (9a or 9b ebtor	STATE POSTAL CODE RESTATE covered collateral the record is limited to certain collateral and describe the DESCRIBED AS FOLLOWS; NORTHERLY OF THE SOUTHWEST CORNER OF	SUFFIX COUNTRY ASSIGN* collateral
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UCC FINANCING STATEMENT AMENDMENT ADDEFOLLOW INSTRUCTIONS	NDUM			
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 202203180045 03/18/2022				
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form				
12a. ORGANIZATION'S NAME 1st Security Bank of Washington				
OR 12b. INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INITIAL(S)	UFFIX			
	THE	ABOVE SPACE IS FOR FILING OFFICE	USE ONLY	
13. Name of DEBTOR on related financing statement (Name of a current Debtor of record require one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the content of the c			Provide only	
13a. ORGANIZATION'S NAME				
OR 13b. INDIVIDUAL'S SURNAME FIRST PERSO	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
Sorsdahl Claudia		J		
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):	OF LOTS 56 AI FOLLOWS; BEGINNING A ⁻ SAID LOT 56. V SOUTHEASTE THENCE SOUTHEASTE CORNER OF S		ED AS RLY LINE OF LY OF THE T 56; JTHWEST THERLY	
18. MISCELLANEOUS:				

UCC FINANCING STATEMENT AMENDMENT ADDENDUM **FOLLOW INSTRUCTIONS** 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 202203180045 03/18/2022 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a, ORGANIZATION'S NAME 1st Security Bank of Washington 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 FIRST PERSONAL NAME 13b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Sorsdahl Claudia 14. ADDITIONAL SPACE FOR (CHECK ONE BOX): OTHER INFORMATION (Please Describe) ITEM 8 (Collateral) OR 15. This FINANCING STATEMENT AMENDMENT: 7. Description of real estate: DISTANCE OF 97.89 FEET; THENCE; covers timber to be cut covers as-extracted collateral is 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): is filed as a fixture filing NORTHEASTERLYTO A POINT ON THE EAST LINE OF LOT 57. THAT IS 48 FT. NORTHERLY OF THE SOUTHEAST CORNER OF SAID LOT 67; THENCE SOUTHERLY ALONG THE EAST UNE OF SAID LOTS 56 ANO 57. A DISTANCE OF 75 FT TO THE POINT OF BEGINNING. 18. MISCELLANEOUS: