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Skagit County Auditor, WA

UCC FINANCING STATEMENT AMENDMENT

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)		1		
CSC 1-800-858-5294				
B. E-MAIL CONTACT AT SUBMITTER (optional)		1		
SPRFiling@cscglobal.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
3246 96181 CSC				
901 Adlai Stayanan Driva	d In: Washington			
Springfield, IL 62703	(Skagit) I			
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SEE BELOW FOR SECURED PARTY CONTACT INFO			PACE IS FOR FILING OFFICE U	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 201312270030 12/27/2013 Skagit County, WA		1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Filer: attach Amendment Addendum (Form UCCSAd) and provide Debtor's name in item 13.		
2. TERMINATION: Effectiveness of the Financing Statement identified ab	pove is terminated with resp	ect to the security interest(s) of	Secured Part(y)(ies) authorizing this Te	ermination Statement
ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and addre For partial assignment, complete items 7 and 9; check ASSIGN Collateral				
CONTINUATION: Effectiveness of the Financing Statement identified additional period provided by applicable law	above with respect to the s	ecurity interest(s) of Secured Pa	arty authorizing this Continuation Stater	ment is continued for the
5. PARTY INFORMATION CHANGE:				
Check one of these two boxes:	heck one of these three bo			
This Change affects Debtor or Secured Party of record	CHANGE name and/or a item 6a or 6b; and item 7	ddress: Complete ADD		ame: Give record name ed in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information			To be deleted	od iii koiii od di ob
6a. ORGANIZATION'S NAME	7	· , ,		
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S	S) SUFFIX
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FOLLOW INSTRUCTIONS 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 201312270030 12/27/2013 Skagit County, WA 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 13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Hancock James 14. ADDITIONAL SPACE FOR (CHECK ONE BOX): OTHER INFORMATION (Please Describe) ITEM 8 (Collateral) OR 15. This FINANCING STATEMENT AMENDMENT: 17. Description of real estate: APN 38770000660005 covers timber to be cut covers as-extracted collateral final final final covers as-extracted collateral final fina covers timber to be cut is filed as a fixture filing LOT 66, "CEDARGROVE ON THE SKAGIT", ACCORDING TO PLAT RECORDED IN VOLUME 9 OF PLATS, PAGES 48 TO 51, INCLUSIVE, RECORDS OF SKAGIT COUNTY, WASHINGTON. 18. MISCELLANEOUS:

UCC FINANCING STATEMENT AMENDMENT ADDENDUM