## GoodLeap, LLC

## Record at the request of a when recorded return to: 202511170029

11/17/2025 10:21 AM Pages: 1 of 2 Fees: \$304.50 Skagit County Auditor

UCC FINANCING STATEMENT AME	ENDMENT			
FOLLOW INSTRUCTIONS  A. NAME & PHONE OF CONTACT AT SUBMITTER (option	nal)	7		
B. E-MAIL CONTACT AT SUBMITTER (optional) filings@goodleapsupport.com		1		
C. SEND ACKNOWLEDGMENT TO: (Name and Address	)	1		
GoodLeap LLC	コ			
PO Box # 981440   El Paso, TX 79998- 1440	1			
SEE BELOW FOR SECURED PARTY CONTA	ACT INFORMATION	THE ABOVE OF	PACE IS FOR FILING OFFICE USI	E ONLY
1a, INITIAL FINANCING STATEMENT FILE NUMBER	ACT INFORMATION		MENT AMENDMENT is to be filed [for re L ESTATE RECORDS. Filer: attach Amer	
09/11/2024 202409110132 Skagit, WA		(Form UCC3Ad) and pro	vide Debtor's name in Item 13.	nament Addendum
2. TERMINATION: Effectiveness of the Financing Statement in	identified above is terminated with res	pect to the security interest(s) of \$	Secured Part(y)(les) authorizing this Term	ination Statement
3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b For partial assignment, complete items 7 and 9; check ASSIG	o, and address of Assignee in Item 7c	and name of Assignor in item 9		
4. CONTINUATION: Effectiveness of the Financing Statemen			dy authorizing this Continuation Statemer	at is continued for the
additional period provided by applicable law	The state of the s	bootany who so (cy or boota so vice		
5. PARTY INFORMATION CHANGE:	AND Check and of these three he	avee to		
Check one of these two boxes:  This Change affects Debtor or Secured Party of record	AND Check one of these three bo CHANGE name and/or item 6a or 6b; and item		name: Complete item DELETE nam 7b, and item 7c to be deleted	e; Give record name in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party			70, <u>and</u> hem 70 I no be deleted	it tem oa or ob
6a. ORGANIZATION'S NAME				
OR Bb. INDIVIDUAL'S SURNAME	FIRST PERSON	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	ISUFFIX
Dillman	David		,	
7. CHANGED OR ADDED INFORMATION: Complete for Assignm	ment or Party Information Change - provide only	r <u>one</u> name (7a or 7b) (use exact, fu <b>ll</b> nam	e; do not omit, modify, or abbreviate any part of the	Debtor'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 POSTAL CODE	COUNTRY
B. COLLATERAL CHANGE: Check only one box:  Indicate collateral: 47790000160000	ADD collateral *Check ASSIGN COLLATERAL	DELETE collateral only if the assignee's power to amend the	RESTATE covered collateral record is limited to certain collateral and describe the	ASSIGN* collateral e collateral in Section 8
(0.4500 AC) LOT 16, PLAT OF	ANKNEY HEIGHT	S ACCODDING	TO THE DI AT THE	, PEOE
RECORDED AUGUST 23, 200			TO THE PLAT THE	NEOF,
. 1200. 1212 / 100001 20, 200	., 5.152.(7.05)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
NAME OF SECURED PARTY OF RECORD AUTHOR     If this is an Amendment authorized by a DEBTOR, check here	RIZING THIS AMENDMENT: Pro and provide name of authorizing (		ame of Assignor, if this is an Assignment)	
9a, ORGANIZATION'S NAME GoodLeap LLC				
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSO	VAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:	lman & Candace Dilln		Skagit	

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 09/11/2024 202409110132 Skagit, WA 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a, ORGANIZATION'S NAME GoodLeap LLC 12b, INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(\$)/INITIAL(\$) 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 OR 13b, INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Dillman David 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 // 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): 305 LONGTIME LN, SEDRO WOOLLEY, WA 98284 David Dillman & Candace Dillman COUNTY Skagit APN 47790000160000 (0.4500 AC) LOT 16, PLAT OF ANKNEY HEIGHTS, ACCORDING TO THE PLAT THEREOF, RECORDED AUGUST 23, 2001, UNDER AUDITORS FILE NO.

18. MISCELLANEOUS:

**FIXTERM**