Waymire Skamania County, WA UCC FINANCING STATEMENT AMENDMENT **FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294 B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 1638 48544 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Washington (Skamania) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] 1a. INITIAL FINANCING STATEMENT FILE NUMBER (or recorded) in the REAL ESTATE RECORDS 2014000836 05/27/2014 Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8 CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law 5. PARTY INFORMATION CHANGE: AND Check one of these three boxes to Check one of these two boxes: CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c ADD name: Complete item 7a or 7b, and item 7c DELETE name: Give record name to be deleted in item 6a or 6b This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX JUDITH SMITH 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; 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 STATE POSTAL CODE COUNTRY USA 8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral ROOF collateral: APN: 01051120010000 LEGAL: BEGINNING AT A POINT ON THE SOUTH BOUNDARY OF STATE ROAD#8 RIGHT OF WAY 760.65 FEET SOUTH AND 2433.06 FEET WEST OF THE NORTHEST CORNER OF SECTION 11, TOWNSHIP 1 NORTH, RANGE 5 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME 1st Security Bank of Washington OR 9b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) FIRST PERSONAL NAME SUFFIX 10. OPTIONAL FILER REFERENCE DATA: Debtor: SMITH, JUDITH A - :5150725350 SMITH 1638 48544

CORPORATION SERVICE COMPANY Page: 1 of 2 File Fee: \$100.00 Auditor Robert J.

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AFN #2019000713 Recorded May 13,

OLI	CC FINANCING STATEMENT AMENDN LOW INSTRUCTIONS NITIAL FINANCING STATEMENT FILE NUMBER: Same as item		DUM 	
	014000836 05/27/2014 NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as	't 0 A d t		
Γ	12a. ORGANIZATION'S NAME 1st Security Bank of Washington	Rem 9 on Americanent form		
R-	12b. INDIVIDUAL'S SURNAME		. 0	
	FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S)	SUFFI)
	Name of DEBTOR on related financing statement (Name of a curr			
_	one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, 13a. ORGANIZATION'S NAME	or abbreviate any part of the I		ot fit
			Debtor's name); see Instructions if name does r	
4. <i>F</i>	13b. INDIVIDUAL'S SURNAME ADDITIONAL SPACE FOR ITEM 8 (Collateral): AST OF THE WILLAMETTE MERIDIAN, IN TH		NAME ADDITIONAL N	
4. A EA SO AL TH EA	13b. INDIVIDUAL'S SURNAME ADDITIONAL SPACE FOR ITEM 8 (Collateral):	E COUNTY OF SP RTH BOUNDARY 16' WEST 156.00 I IENCE SOUTH 55 Y OF SATE ROAD ' TO POINT OF BE	ADDITIONAL N ADDITIONAL N CAMANIA, STATE OF WASH OF OLD COUNTY ROAD RIC FEET; THENCE SOUTH 37*3 *59' WEST 124.0 FEET; THE NO. 8 RIGHT OF WAY; THE EGINNING EXCEPT THAT PO	INGTON; THENCE GHT OF WAY; THENC 30' WEST 233.00 FEE NCE NORTH 27*32' NCE IN EASTERLY