3206883 BK 7397 PG 1896

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)	
Nick Barzellone 405-236-0003	
B. E-MAIL CONTACT AT FILER (optional)	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
_	_
McCoy & Orta, P.C.	,
100 North Broadway, 26th Floor	
Oklahoma City, OK 73102	
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10 IMITIAL CINANCINO STATEMENT EL C NUMBER	

E 3206883 B 7397 P 1896-1898 RICHARD T. MAUGHAN DAVIS COUNTY, UTAH RECORDER 11/26/2019 3:08:00 PM FEE \$40.00 Pgs: 3

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A. NAME & PHONE OF CONTACT AT FILER (optional)		DEP eC	ASH REC	D FOR AN	DERS	ON McCO
Nick Barzellone 405-236-0003		1		2.0		
B. E-MAIL CONTACT AT FILER (optional)		1				
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C. SEND ACKNOWLEDGMENT TO: (Name and Address)		Į.				
McCoy & Orta, P.C.						
100 North Broadway, 26th Floor		Į.				
Oklahoma City, OK 73102						
I L						
4		THE ABOVE 1b. This FINANCING ST		R FILING OFFICE		
1a. INITIAL FINANCING STATEMENT FILE NUMBER # 3172466/Bk 7304/Pg 464 filed 7/15/19		(or recorded) in the 8	REAL ESTATE R	ECORDS		
		Filer: attach Amendmen				
TERMINATION: Effectiveness of the Financing Statement identified above Statement	is terminated v	with respect to the security in	iterest(s) of Sec	ured Party authoriz	ing this i	ermination
 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 col 			me of Assignor	n item 9		
CONTINUATION: Effectiveness of the Financing Statement identified abortional period provided by applicable law	ve with respec	t to the security interest(s) of	Secured Party	authorizing this Co	ntinuation	Statement is
5. PARTY INFORMATION CHANGE:						
Check one of these two boxes: AND Check one of these two boxes:			O name: Complet	nitom DELETE	name: C	ive record name
This Change affects Debtor or Secured Party of record item 6a	or 6b; and item	address: Complete 7a or 7b <u>and</u> item 7c 7a o	or 7b, and item 7c	to be de		m 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Change	e - provide only	one name (6a or 6b)				
6a. ORGANIZATION'S NAME						
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITION	IAL NAME(S)/INITI	AL(S)	SUFFIX
 CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME 	n Change - provide	only <u>one</u> name (7a or 7b) (use exact	full name, do not on	it, modify, or abbreviate	any part of ti	ne Debtor's name)
U.S. BANK NATIONAL ASSOCIATION, AS TRUST	TEE*					
OR 7b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
	CITY		STATE	POSTAL CODE		COUNTRY
One Federal Street, 3rd Fl., Mail Code EX-MA-FED	Boston		MA	02110		USA
8. COLLATERAL CHANGE: Also check one of these four boxes; ADD	collateral	DELETE collateral	RESTATE 0	overed collateral	AS	SIGN collateral
Indicate collateral:						
 FOR THE REGISTERED HOLDERS OF WELLS FA 				CURITIES,	INC.,	
MULTIFAMILY MORTGAGE PASS-THROUGH CERT	IFICATES	S, SERIES 2019-SI	368			
ABN 04 047 0440						
APN: 01-047-0148						
 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM If this is an Amendment authorized by a DEBTOR, check here and provide no 	IENDMENT: ame of authoriz		9b) (name of Ass	signor, if this is an A	ssignmen	r)
8a. ORGANIZATION'S NAME		ang beens				
FEDERAL HOME LOAN MORTGAGE CORPORA	TION					
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INIT	AL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: M&O Ref.: 7602.188 N Orchard Dr 41 (Loan No				00:::::::::::::::::::::::::::::::::::::		
MIX.O Dof : 7603 100 N Ovebord Dr /1 / Joan N	~ EU3U0	70601 EII E WIT	H DAMIS	COLINITY	LIT	

3206883 BK 7397 PG 1897

FOLLOW INSTRUCTIONS		12011			
 INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1s 3172466/Bk 7304/Pg 464 filed 7/15/19 	on Amendment form				
2. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as ite		m			
12a ORGANIZATION'S NAME FEDERAL HOME LOAN MORTGAGE CORPO	RATION				
OR 12b. INDIVIDUAL'S SURNAME					
12b. INDIVIDUAL S SORIVAME					
FIRST PERSONAL NAME					
ADDITIONAL NAME(S)/INITIAL(S)	su	FFIX	HE ABOVE SPACE IS FOR FILIN	G OFFICE L	ISE ONLY
 Name of DEBTOR on related financing statement (Name of a curren one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or 		red for indexing purp	oses only in some filing offices - see In		
13a. ORGANIZATION'S NAME 25 ORCHARD DRIVE, LLC					
OR 13b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIONAL NAME(S)	/INITIAL(S)	SUFFIX
15. This FINANCING STATEMENT AMENDMENT: □ covers timber to be cut □ covers as-extracted collateral ✓ is 16. Name and address of a RECORD OWNER of real estate described in item 1 (if Debtor does not have a record interest):	tiled as a fixture filing		al estate: property more specifica attached hereto and mad		
18. MISCELLANEOUS:					

EXHIBIT A LEGAL DESCRIPTION

The land referred to in this policy is in the State of Utah, County of Davis, and is described as follows:

Beginning on the West line of Orchard Drive at a point North 89 deg. 52' West 1280.3 feet along the section line and North 43 deg. 18' East 107.0 feet and North 69 deg. 44' West 9.0 feet, more or less, from the South quarter corner of Section 1, Township 1 North, Range 1 West, Salt Lake Meridian, in the City of North Salt Lake, and running thence North 43 deg. 17' East 216.0 feet along said street; thence North 69 deg. 44' West 237.6 feet, more or less, to a point North 22 deg. 50' East of a point 1222.85 feet North 89 deg. 56' East of the Southwest corner of said section; thence South 22 deg. 50' West 215.0 feet, more or less, to a point 115.0 feet North 22 deg. 50' East of the North line of center street; thence Southeasterly on a direct line with the point of beginning, one-half the distance thereto; thence Southeasterly to the West line of Orchard Drive at a point 5.0 feet South 43 deg. 17' West of the point of beginning, thence North 43 deg. 17' East 5.0 feet to the point of beginning.

Loan No.: 503097969 M&O File No.: 7602.188 Loan Name: N Orchard Dr 41

Pool: SB-68