3	
_	
_	
_	
•	
_	
_	
-	
_	
_	
_	▋
al	

Ξ						
	C FINANCING STATE	MENT AMENDMENT				
	LOW INSTRUCTIONS	=		_		
	NAME & PHONE OF CONTACT AT I me: Wolters Kluwer Lien Solutio		18-662-4141			
₽—	F-MAIL CONTACT AT FILER (option	<u></u>		\dashv		
L	uccfilingreturn@wolterskluwer.e					
C :	SEND ACKNOWLEDGMENT TO (N	ame and Address) 265027 - FLA	GSTAR			
lſ	 Lien Solutions	92583	114			
Ι΄	P.O. Box 29071		114 1	i		
	Glendale, CA 91209-9071	RIRI				
H			1			
Ľ	File with S	Secretary of State, RI		THE ABOVE SPA	CE IS FOR FILING OFFICE U	SE ONLY
-	NITIAL FINANCING STATEMENT FILE 1009124050 10/7/2010 SS			1b. This FINANCING STATE	MENT AMENDMENT is to be filed [for record)
_				Éller jartach Amendment Add	lendum (Form UCC3Ad) <u>and</u> provide Deb	
2	Statement	Financing Statement identified above is	s terminated with	h respect to the secunty interest(s)	of Secured Party authorizing this T	emination
3.	ASSIGNMENT (full or partial) Provide	e name of Assignee in item 7a or 7b, <u>a</u> r	nd address of A	ssignee in item 7c and name of A	ssignor in item 9	
_	For partial assignment, complete item	ns 7 and 9 <u>and</u> also indicate affected co	ollateral in item t	8		
4. [CONTINUATION: Effectiveness of the continued for the additional period pro	e Financing Statement identified above ovided by applicable law	with respect to	the security interest(s) of Secured	Party authorizing this Continuation	Statement is
5. 🛭	PARTY INFORMATION CHANGE			<u> </u>		
	heck one of these two boxes	AND Check one o	SE name and/or :	artiture Committee ADD nom	e Complete dem DELETE name	: Give record name
	his Change affects Debtor or Ser	cured Party of record	or 6b, <u>and</u> item	7a or 7b <u>and</u> item 7c 7a or 7b.		n item 6a or 6b
6 0	URRENT RECORD INFORMATION CO 65 ORGANIZATIONS NAME	implete for Party Information Change -	provide only <u>on</u>	e name (6a or 6b)	. 	
	FLAGSTAR BANK F.S.B.					
OR	6b INDIVIDUAL'S SURNAME	· · · · · · · · · · · · · · · · · · ·	FIRST PERSON	AL NAVE	ADDITIONAL NAME(SYNITIAL(S)	SUFFIX
		····				
7. C	HANGED OR ADDED INFORMATION 7# ORGANIZATIONS NAME	Complete for Assignment or Party Information Cha	inge provide only	one name (7a or 7b) (use exact full name,	do not omit, modify, or abbreviate any part of	the Debtor's name)
	FLAGSTAR BANK, N.A.					
OR	/b INDIVIDUAL'S SURNAME	·····				
	INDIVIDUAL'S FIRST PERSONAL NAME					
1	INDIVIDUAL'S ADDITIONAL NAME(SYIN	ITIAL(S)	-			SUFFIX
/c	MAILING ADDRESS	·	CITY		STATE POSTAL COOF.	COUNTRY
$\overline{}$	1 WEST MICHIGAN AVENUE	<u> </u>	JACKSON		MI 49201	USA
8 [COLLATERAL CHANGE Also che	eck <u>one</u> of these four boxes ADD	collateral	DELETE collateral R	ESTATE covered collateral	ASSIGN collateral
	Indicate coffateral					
_						
	AME OF SECURED PARTY OF RE				ame of Assignor, if this is an Assignm	nent)
'' 	this is an Amendment authorized by a DE 9a. ORGANIZATION'S NAME	.B FOR, check here and provide n	ame of authorizi	ng Debtor	· ··	
	FLAGSTAR BANK F.S.B.					
OR	96 INDIVIDUAL'S SURNAME		FIRST PERSON	AL NAME	ADDITIONAL NAME(SYINITIAL(S)	SUFFIX
	PTIONAL FILER REFERENCE DATA	Dobto: Maine: Ocaooast mortg		lion		
925	83114	Seacoast Mortgage Corporation	on .			

RI SOS Filing Number: 202328984040 Date: 4/26/2023 11:52:00 AM

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

	NITIAL FINANCING STATEMENT FILE NUMBER. Same as item to on Amend	ment form				
_	1009124050 10/7/2010 SS RI					
12.	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on An	nendment for	m			
	128 ORGANIZATION'S NAM'E FLAGSTAR BANK F.S.B.					
OR	12b. INDIVIDUAL'S SURNAME					
	FIRST PERSONAL NAME					
	ADDITIONAL NAME(SYMITIAL(5)		SUFFIX	THE ABOVE SI	PACE IS FOR FILING OFFICE	USE ONLY
13.	Name of DEBTOR on related financing statement (Name of a current Debtor of one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or ab	record requir obreviate any	red for indexing part of the Debt	purposes only in some or's name), see Instru	a filing offices - see Instruction it clions if name does not fit	em 13): Provide only
	13a ORGANIZATION'S NAME Seacoast Mortgage Corporation					
OR		FIRST PERS	ONAL NAME		ADDITIONAL NAME (SYMITIAL(S)	Suffix
Det Sea Sec FL/	ADDITIONAL SPACE FOR ITEM 8 (Collateral) bitor Name and Address: acoast Mortgage Corporation - 267 Newport Avenue , Pawtucket, cured Party Name and Address: AGSTAR BANK, N.A 301 WEST MICHIGAN AVENUE , JACKS This FINANCING STATEMENT AMENDMENT	SON, MI 49	17 Descript	ion of real estate:		
	Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest)	s a fixture filir	1			
18	MISCELLANEOUS 92583114-RI-0 265027 - FLAGSTAR BANK FLAGS	TAR BANK F S	В	File with Secretary of Sta	ite, RI — Selacoast Modgage Corp	oration