WHEN RECORDED,
RETURN TO:
WASHINGTON FEDERAL SAVINGS
116 KIRKLAND AVE
KIRKLAND WA 98033

Attn:

200808080077
Skagit County Auditor
8/8/2008 Page 1 of 2 11:35AM

LAND TITLE OF SKAGIT COUNTY
122241-S

Date AUGUST 1, 2008 Loan No. 320279-3

NOTICE OF MODIFICATION OF DEED OF TRUST

NOTICE TO ALL PERSONS is given that **Washington Federal Savings**, as the Beneficiary/(Grantee) of that Deed of Trust dated 08/16/06, recorded under AUDITOR'S FILE No. 200608180001, in the Records of SKAGIT County, State of WASHINGTON has, this date, modified the terms of the Note secured by the Deed of Trust ("the Loan Contract and Security Instrument"), as approved by CHAFFEY NORTH LLC, A WASHINGTON LIMITED LIABILITY COMPANY, **Grantor** (or Successor Grantor)

Check Appropriate Box(es)	**IMPORTANT**: Any numbered paragraph, which is highlighted by the mark of an "X" in the box opposite it and whose blank lines or spaces are filled in, is part of this notice. Any other numbered paragraph not so highlighted, is not part of this notice.

[X] 1. The Maturity Date of the Loan Contract and Security Instrument has been changed from 08/16/08 to 08/16/10.

[X] 2 The Loan Contract and Security Instrument has also been modified in a manner other than change in the Maturity Date.

The purpose of this document is to provide record notice, when required, of a modification in the terms of the loan contract and security instrument. It is not intended to nor shall it be deemed to alter in any manner the actual terms of any loan modification agreement between the grantor of the security instrument (or the successor of grantor) and WASHINGTON FEDERAL SAVINGS 425 PIKE STREET SEATTLE WA 98101 as beneficiary. Notice is given to all persons that, except for the terms of any loan modification agreement, the terms of the original loan contract and security instrument shall in all other respects remain in full force and effect.

WASHINGTON FEDERAL SAVINGS

by: Christy Cairns
CHRISTY CAIRNS
Title: ASSISTANT MANAGER

Grantor(s)

CHAFFEY NORTH LLC
BY: CHAFFEY HOMES INC., MEMBER
Carina M Shively
CARINA M SHIVELY, SECRETARY

(Over for notary acknowledgments)

UNOFFICIAL DOCUMENT

STATE OF)
) ss.
COUNTY OF)

I certify that I know or have satisfactory evidence that _____

_____

_____

[Name(s) of person(s)]

is/are the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument and acknowledged it to be (his/her/their) free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: _____

_____
(Signature)

(Seal or Stamp)

Notary Public in and for the State of _____,

residing at _____

My commission expires _____

STATE OF)
) ss.
COUNTY OF)

I certify that I know or have satisfactory evidence that Carina Shively

_____

_____

[Name(s) of person(s)]

is/are the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument, on oath stated that (he/she/they) was/were authorized to execute the instrument and acknowledged it as the Secretary of Chaffey Homes

_____

(Type of Authority, e.g., Officer, Trustee)

of _____

(Name of the Party on Behalf of Whom the Instrument was Executed)

to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated: 8-7-08

Lee A. Charouhas
(Signature)

(Seal or Stamp)

Notary Public in and for the State of WA.,

residing at Kirkland

My commission expires 6-13-09



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