Entry #: 460265

12/20/2017 12:12 PM UCC CONTINUATION

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FEE: \$16.00 BY: CT LIEN SOLUTIONS
Jerry Houghton, Tooele County, Utah Recorder

UCC FINANCING STATEMENT AMENDMENT

	LOW INSTRUCTIONS) MICIA I		<u> </u>					
A. 1	NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141			7.			,		
В. Г	E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@woltersk	kluwer.com		7			-		
С. :	SEND ACKNOWLEDGMENT TO: (Name and Address) 23	3814 - 2381 ₄	4-WELLS	7			,		
 	Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	61953 UTUT FIXTU	·						
Ιl	File with Torolo 117	11/10		THE ABOVE	E EDACE IS EC	ND EIL ING OFFICE	HEE ONLY		
	File with: Tooele, UT NITIAL FINANCING STATEMENT FILE NUMBER		_	1b. This FINANCING	STATEMENT AM	DR FILING OFFICE ENDMENT is to be file			
383	3493 4/29/2013 CC UT Tooele				nent Addendum (For	m UCC3Ad) and provide I			
2	TERMINATION: Effectiveness of the Financing Statement idea Statement	ntified above is	s terminated with	h respect to the security int	erest(s) of Secure	d Party authorizing thi	s Termination		
3.	ASSIGNMENT (full or partial): Provide name of Assignee in ite For partial assignment, complete items 7 and 9 and also indic				ne of Assignor in	item 9			
4. 🛭	CONTINUATION: Effectiveness of the Financing Statement id continued for the additional period provided by applicable law	lentified above	with respect to	the security interest(s) of S	ecured Party auth	norizing this Continuati	on Statement is		
	illeck <u>offe</u> of these two boxes.	CHANG		address: CompleteA	DD name: Comple		ame: Give record name		
_	his Change affects Debtor or Secured Party of record URRENT RECORD INFORMATION: Complete for Party Informa				a or 7b, <u>and</u> item 7	to be delete	ed in item 6a or 6b		
	Ga. ORGANIZATION'S NAME OVERPASS POINT MHC, LLC	-							
OR	6b. INDIVIDUAL'S SURNAME		FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
7. C	I HANGED OR ADDED INFORMATION: Complete for Assignment or Pai	nty Information Cha	ange - provide only	one name (7a or 7b) (use exact, f	ull name; do not omit, r	nodify, 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)			· · · · · · · · · · · · · · · · · · ·		1	SUFFIX		
7c. i	MAILING ADDRESS		CITY	<u> </u>	STATE	POSTAL CODE	COUNTRY		
			<u> </u>						
8. L LO/	COLLATERAL CHANGE: <u>Also</u> check <u>one</u> of these four bo Indicate collateral: · AN # 440000237	oxes: LADD) collateral	DELETE collateral	∐ RESTATE	covered collateral	ASSIGN collateral		
SE	E EXHIBIT A LEGAL DESCRIPTION ATTACHED H	ERETO AN	D INCORPO	RATED HEREIN BY	THIS REFERE	NCE.			
			•						
	IAME OF SECURED PARTY OF RECORD AUTHORIZIN		ENDMENT: Properties	· — ·	r 9b) (name of Ass	ignor, if this is an Assig	jnment)		
"	9a. ORGANIZATION'S NAME U.S BANK NATIONAL ASSOCIATION, AS TI	RUSTEE F	OR THE R	EGISTERED HOLD					
OR	MORTGAGE TRUST 2013-C14, COMMERC 9b. INDIVIDUAL'S SURNAME	IAL MORT	GAGE PAS FIRST PERSON			SERIES 2013-0 NAL NAME(S)/INITIAL(S)	SUFFIX		
	OPTIONAL FILER REFERENCE DATA: Debtor Name: OVE	ERPASS PO	I DINT MHC, L	LC	1				
619	953730 440000237								

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	CC FINANCING STATEMENT AMENDME	NT ADDEND	JM			
38	LLOW INSTRUCTIONS INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a or 3493 4/29/2013 CC UT Tooele	Amendment form	·			
_	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item	9 on Amendment form				
	12a. ORGANIZATION'S NAME U.S BANK NATIONAL ASSOCIATION, AS TRUS REGISTERED HOLDERS OF WFRBS COMMER	TEE FOR THE	=			
	TRUST 2013-C14, COMMERCIAL MORTGAGE F CERTIFICATES, SERIES 2013-C14					
OF						
	FIRST PERSONAL NAME					
	ADDITIONAL NAME(S)INITIAL(S)	sı	JFFIX	THE ABOVE \$	SPACE IS FOR FILING OFFICE US	SE ONLY
13	. Name of DEBTOR on related financing statement (Name of a current Done Debtor name (13a or 13b) (use exact, full name; do not omit, modi	Debtor of record required ify, or abbreviate any parties.	for indexing t of the Debt	purposes only in son or's name); see Instr	ne filing offices - see Instruction iter actions if name does not fit	n 13): Provide only
	13a. ORGANIZATION'S NAME OVERPASS POINT MHC, LLC					
OF	13b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
De OV Se U. 20 IL Th	ADDITIONAL SPACE FOR ITEM 8 (Collateral): sector Name and Address: //ERPASS POINT MHC, LLC - 31200 NORTHWESTERN Fecured Party Name and Address: S BANK NATIONAL ASSOCIATION, AS TRUSTEE FOR T 13-C14, COMMERCIAL MORTGAGE PASS-THROUGH C 60603 secomplete information for Authorizer number 1 S BANK NATIONAL ASSOCIATION, AS TRUSTEE FOR T 13-C14, COMMERCIAL MORTGAGE PASS-THROUGH C 13-C14, COMMERCIAL MORTGAGE PASS-THROUGH C	THE REGISTERED CERTIFICATES, SEI	HOLDERS RIES 2013 HOLDERS	OF WFRBS CO -C14 - 190 S LA	SALLE STREET, 7TH FLOO	R , CHICAGO,
_	5. This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted collateral S. Name and address of a RECORD OWNER of real estate described in	is filed as a fixture filing	•	ion of real estate:		

440000237

18. MISCELLANEOUS: 61953730-UT-45 23814 - 23814-WELLS FARGO CM U.S BANK NATIONAL ASSOCIATION, File with: Tooele, UT

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EXHIBIT A

Legal Description

(See Attached)

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Overpass Point

LOT 1, OVERPASS POINT SUBDIVISION, A SUBDIVISION OF TOOELE CITY, ACCORDING TO THE OFFICIAL PLAT THEREOF, ON FILE AND OF RECORD IN THE OFFICE OF THE TOOELE COUNTY RECORDER.

APN(s): 12-082-0-0001