3722/0119 z1 001 Page 1 of

2002-05-10 13:47:49

Cook County Recorder

23.50

UCC FINANCING, STATEMENT AMENDMENT

1

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) LexisNexis Document Solutions 135 South LaSalle Street **Suite 2260** Chicago, Il 60603 1729754-28



	<u> </u>				****		R FILING OFFICE USE	
1a.	INITIAL FINANCING STATE 00101745	· · · ().	/6/01	ı		to b	FINANCING STATEMENT / Tiled [for record] (or record AL ESTATE RECORDS.	
2.	TERMINATION: Effect	ctiveness of the Fin	arking Statement identified above is	terminated with respect to sec	curity interest(s) of the Se	cured Pa	ty authorizing this Terminatio	n Statement.
3.	CONTINUATION: Efficient continued for the addition	fectiveness of the I mal period provides	inan ing S stement identified about by applicative law.	ve with respect to security inte	rest(s) of the Secured P	arty autho	orizing this Continuation Stat	ement is
4.	ASSIGNMENT (full or	partial): Give nam	e of assignee in it 7s or 7b and/a	ddress of assignee in item 7c;	and also give name of as	signor In	item 9.	
. Y	Also sheck one of the follows	ing three boxes <u>and</u> ddress: Give curre	; This Amendment affocts Det provide appropriate information in intrecord name in item 6a c 6h; also for new address (if address chause)	terns 6 and/or 7.	record. Check only <u>one</u> ame: Give record name ed in item 6a or 6b.	[_] V[two boxes. DD name: Complete item 7s or rn 7c; also complete items 7d	or 7b, and also I-7a (if applicable).
_	CURRENT RECORD INFO	-	10 Hew 8001033 III 8001030 3119					
	6a. ORGANIZATION'S NA S.M. Ac		CO., DBA Stylem	aster	بدر	•		•
OR	66, INDIVIDUAL'S LAST N	IAME		FIRST N ME		MIDDLE	NAME	SUFFIX
7. 0	CHANGED (NEW) OR AD	DED INFORMATI	ON:	Q_{L}				<u> </u>
	7a. ORGANIZATION'S NA JR Plas				X			**
OR	76, INDIVIDUAL'S LAST N	IAME		FIRST NAME	C	MIDDLE		SUFFIX
7c. MAILING ADDRESS 1330 West 43rd Street			Chicago		STATE TL	POSTAL CODE 60609	USA	
	TAX ID #: SSN OR EIN 033153	ADD'L INFO RE ORGANIZATION DEBTOR	7e. TYPE OF ORGANIZATION LLC	7f. JURISDICTION OF ORG	GANIZATION IL		ANIZATIONAL ID #, If any 686557	NONE
	AMENDMENT (COLLAT Describe collateral delet); check only <u>one</u> box. or give entire restated collaten	al description, or describe col	lateral assigned.	•	0/%	

Collateral remains the same.

Section 25, Township 38 North, Range 13

9a. ORGANIZATION'S NAME HSBC Business Credit (USA) Ir	nc.	(sa) Marie	Nowico
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX