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| B. SEND ACKNOWLEDGMENT TO: (Name and Address)  Lexis Document Solutions & Corporation Service Company 135 South LaSalle St. Stc. 2260 Chicago, II 60603  Lexis Document Solutions & THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1a. Initial Financing Stateways Fig. 8  1b. This Financing Stateways Fig. 8  1c. State Financing Stateways Fig. 8  1c. Amendment (full or partial): One name of assigned in the financing Stateways Financing Fig. 8  1c. Amendment (full or partial): One name of assigned in the financing Stateways Financing Fina | OLLOW INSTRUCTION                           | S STATEMENT AMENDME S (front and back) CAREFULLY                               | 6316832097  Eugene "Gene" Moore Fee: \$26.50  Cook County Recorder of Deeds |  |   |                                    |
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| Corporation Service Company 135 South LaSalle St. Ste. 2260 Chicago 1 60603  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 13 INTIAL FINANCING STATEMENT FILE #  98914679 Date   | Levis Do                                    | nument Solutions &   | ıs  |  |   |                                    |
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| 98914679 Date . 0/13/1998    Technikation: Effectiveness of use informing Statument identified above is ferminated with respect to security interestly of the Secured Party authorizing this Termination Statement.  |   | Ó  |   | THE ABOVE SPAC                               |   |                                    |
| TERMINATION: Effectiveness of the first oning Statement Identified above is terminated with respect to security interest(s) of the Secured Party authorizing the Termination Statement Is continued for the additional period provided of applicable law.    ASSIGNMENT (full or partial): Own name of assigns in plan 7a or 7b and audites of assigns in item 7c, and also give name of assignor in item 9.    AMENDMENT (FARTY INFORMATION): This Amendment variety is continued for the library three costs and provided provided of applicable law.    ASSIGNMENT (full or partial): Own name of assigns in plan 7a or 7b and audites of assigns in item 7c, and also give name of assignor in item 9.    AMENDMENT (FARTY INFORMATION): This Amendment variety is continued for the library three costs again provide applicable law.    ASSIGNMENT (full or partial): Own name of assigns in plan 7a or 7b and auditered of assigns in item 7c, and also give name of assignor in item 9.    AMENDMENT (FARTY INFORMATION): This Amendment variety is plan and auditered of assigns in item 7c, and also give name of assignor in item 9.    AMENDMENT (FARTY INFORMATION): This Amendment variety is plan and auditered of assigns in item 7c, and also give name of assignor in item 9.    AMENDMENT (FARTY INFORMATION): This Amendment variety is plan and auditered of assigns in item 7c, and also give name of assignor in item 9.    AMENDMENT (FARTY INFORMATION): This Amendment variety is plan and auditered of assigns in item 7c, and also give name of assigns in item 9.    AMENDMENT (FARTY INFORMATION): This Amendment variety is plant variety in item 9.    AMENDMENT (FARTY INFORMATION): This Amendment variety is plant variety in item 9.    AMENDMENT (FARTY INFORMATION): This Amendment variety is plant variety in item 9.    AMENDMENT (FARTY INFORMATION): This Amendment variety is plant variety in item 9.    AMENDMENT (FARTY INFORMATION): This Amendment variety is plant variety in item 9.    AMENDMENT (FARTY INFORMATION): This is an Assignment in item 9.    AMENDMENT (FARTY |   |  |   |  | to be filed [for record] (or rec                                |                                    |
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| ASSIGNMENT (tail or partial). Give name of assigner, in Germ 7a or 7b and address of assigner in Item 7c; and also give name of assignor in Item 9.  AMENDMENT (PARTY INFORMATION): This Amendment intends   | CONTINUATION:                               | Effectiveness of the Fir uncing Statement identified                           |   |  |   |                                    |
| ABO CHANGE (PARTY INFORMATION): This Amendment suited by a Debtor of body of record. Check only ong of these two boxes. Also check age of the following three boxes age prompte a information in items 6 and/or 7.  Also check age of the following three boxes age prompte a professional prompted and an experiment of the property of the process of the following three boxes age prompted and an experiment of the process of the following three boxes age prompted and an experiment of the process of the following three boxes and prompted and an experiment of the process of the process of the following three boxes are property of the process of the following three boxes are property of the following three boxes and process of the following three boxes are property of the following three  |   |  |   |  |   |                                    |
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| CURRENT RECORD INFORMATION:  G. ORGANIZATION'S NAME    FRITNAME   MIDDLE NAME   SUFFIX   SUFF |   |  |   | d Party of record. Check only <u>one</u>     | of these two poxes.   |                                    |
| Ga. ORGANIZATION'S NAME    FRISTNAME   | CHANGE name and/or in regards to changing t | address: Please refer to the detailed instructions he name/address of a party. | DELETE nam  | e; Give record name<br>in item 6a or 6b.     | ADD name: Complete item 7a or also complete items 7e-7g (if app | 7b, and also item 7c;<br>licable). |
| R 8b. INDIVIDUAL'S LAST NAME   FRST NAME   MIDDLE NAME   SUFFIX  |   |  |   |  |   |                                    |
| CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  MIDDLE NAME  SUFFIX  CMANAILING ADDRESS  CITY  STATE  FOSTAL CODE  COUNTRY  ORGANIZATION  DEBTOR  ADD'L INFO RE  To: TYPE OF ORGANIZATION  DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one box  Describe collateral  deleted or give entire  restated collateral description, or describe collateral  assigned.  Describe collateral  Tit bis is an Amendment authorized by a Debtor whe adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here  and and enter name of DEBTOR authorizing this Amendment.  TOTAL CORP.  TOTAL CORP.   | 6a. ORGANIZATION'S I                        | IAME   | $\tau_{\sim}$   |  |   |                                    |
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| 76. MAILING ADDRESS  CITY  STATE POSTAL CODE  COUNTRY  G. SEINSTRUCTIONS  ADD'L INFO RE 76 TYPE OF ORGANIZATION OF ORGANIZATIO | 7a. ORGANIZATION ST                         | 4⊅IAI⊏   | ·   | 17   |   |                                    |
| ADD'L INFO RE ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.  Describe collateral organization restated collateral description, or describe collateral assigned.  Describe collateral organization restated collateral description, or describe collateral assigned.  Describe collateral organization restated collateral description, or describe collateral assigned.  Describe collateral organization restated restated collateral description, or describe collateral organization.  Describe collateral organization restated restate | 76. INDIVIDUAL'S LAS                        | NAME   | FIRST NAME  |  | MIDDLE NAME   | SUFFIX                             |
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| ORGANIZATION DEBTOR  ORGANIZATION S NAME   | 7c. MAILING ADDRESS                         |  | CITY  | 0  | STATE POSTAL CODE   | COUNTRY                            |
| DEBTOR  D. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.  P. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor whe adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.  P. ORGANIZATION'S NAME  HELLER FIRST CAPITAL CORP.  | d. SEEINSTRUCTIONS                          | ADD'L INFO RE   7e. TYPE OF ORGANIZATION                                       | 7f. JURISDICTIO   | N OF ORGANIZATION                            | 7g. ORGANIZATIONAL ID#, if an                                   | y                                  |
| Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.  NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor wheads collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.  9a. ORGANIZATION'S NAME  HELLER FIRST CAPITAL CORP.   |   |  |   |  | 0   | Non                                |
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|  | 9a. ORGANIZATION'S                          | e authorizing Debtor, or if this is a Termination author                       | rized by a Debtor, check  | of assignor, if this is an Assignmen<br>here | FOR authorizing this Amendment.                                 |                                    |
|  |   | 101  | FIRST NAME  |  | MIDDLE NAME   | SUFFIX                             |
|  | COTIONAL EILER REFEI                        | RENCEDATADIZE. LIECC/Cov.  |   | 3 T.   |   | 4 117 /                            |

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IL-Cook County

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EXHIBIT "B" LEGAL DESCRIPTION

THE WEST SO FEET OF THE NORTH 1/2 OF THE EAST 2-1/2 ACRES OF BLOCK 16 IN COTTAGE HOME SUBDIVISION OF THE EAST 1/2 OF THE NORTHEAST 1/4 (EXCEPT THE NORTH 33 FEET THEREOF) OF SECTION 9, TOWNSHIP 36 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Commonly known as: 9727 W. 143rd St., Orland Park, IL

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