## UNOFFICIAL COPY

	243233421					
UCC FINANCING STATEM		NT	Doc#:	04303	39021	
A. NAME & PHONE OF CONTACT AT FILE	<del></del>				Moore Fee: \$28 corder of Deeds	.50
B. SEND ACKNOWLEDGMENT TO: (Na)	me and Address)				110:11 AM Pg:	1 of 3
B. JEHO AGRICOVEEDGINERY TO. (Na)	no and Address)	_				
THE RELIABLE BU	JILDING, LLC					
2901 BUTTERFIELI	O ROAD					
OAK BROOK IL 60.	523					
		ᆀ	THE AROVE SPA	ICE IS EO	R FILING OFFICE US	E ONLY
1a. INITIAL FINANCING STATEMENT FILE: *			THE ABOVE STA	1b. This	FINANCING STATEMEN	IT AMENDMENT is
0412732084				<b>I ⊻</b> REA	e filed [for record] (or reco L ESTATE RECORDS.	
TERMINATION: Effectiveness of the F     CONTINUATION: Effectiveness of the F						
continued for the additional period provid	ed by _pplicable law.					internett to
4. ASSIGNMENT (full or partial): Give na						
<ol> <li>AMENDMENT (PARTY INFORMATION Also check one of the following three boxes at</li> </ol>		Debtor <u>or</u> ☐ Secured Part n items 6 and/or 7.	y of record. Check only <u>or</u>	ne of these t	wo boxes.	
CHANGE name and/or address: Please refe	rto the detailed instructions a party.	DELETE name: Give	e record name 6a or 6b.	ADD na	ame: Complete item 7a or 7 mplete items 7e-7g (if appli	b, and also item 7c;
CURRENT RECORD INFORMATION:     [6a, ORGANIZATION'S NAME]						
DA, ORGANIZATION S NAME						
OR 6b. INDIVIDUAL'S LAST NAME		FIRLT NAME	FIR T NAME		MIDDLE NAME	
	·	0,				
<ol> <li>CHANGED (NEW) OR ADDED INFORMA</li> <li>7a. ORGANIZATION'S NAME</li> </ol>	TION:		)			
OR						
7b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
7c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
7d. SÉE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF 6	ORGANIZATION	7g. ORGA	ANIZATIONAL ID#, if any	NONE
AMENDMENT (COLLATERAL CHANGE Describe collateral deleted or deleted and deleted or	, <u>, , , , , , , , , , , , , , , , , , </u>	toral depariation or deparite	collateral assigned.		<u>),,, </u>	
Describe conateraldeleted_ofaddes	r, or give entire Trestated collar	teral description, or describe	collateralassigned.			
					· (C)	$\mathcal{A}$
					0	0,
9. NAME OF SECURED PARTY OF REC						d by a Debtor which
adds collateral or adds the authorizing Debtor  9a. ORGANIZATION'S NAME		ed by a Deptor, check here	and enter name of DEB	or author	izing this Amendment.	
OR FIRST BANK OF HIGH	HLAND PARK					
OR 9b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
10,0PTIONAL FILER REFERENCE DATA						
LOAN# 1650						

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)

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UCC FINANCING STATEMENT ADDENDED FOLLOW INSTRUCTIONS (front and back) CAREFULLY	DUM			
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCII	NG STATEMENT	1		
90. ORGANIZATION'S NAME THE RELIABLE BUILDING LLC		-		
96 INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX	₹		
10. MISCELLANEOUS:		4		
		THE ABOVE SPACE	IS FOR FILING OFF	ICE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert	tonly <u>one</u> debtor name (11a or 11b) - do n	ot abbreviate or combine names		
TEA. ORGANIZATIONS NAME				
OR 11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS	СПҮ	STATE	POSTAL CODE	COUNTRY
11d. TAX ID #: SSN OR EIN ADD'L INFO RE 11e. TYPE OF ORGANIZATION DEBTOR	ATION 11f. JURISDICTION OF ORG.	ANIZATION 11g. ORG		· —
12. ADDITIONAL SECURED PARTY'S or ASSIGNOR :	S/P'S NAME - user only one name (12	<sup>2</sup> a or 12b)		NONE
	4h			
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS	СІТУ	STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers timber to be cut or as-extra collateral, or is filed as a fixture filing.  14. Description of real estate:  PARCEL 1: UNITS 201, 406, 506, C-1 AND C-2 IN RAVINIA LOFTS CONDOMINIUM AS DELINEATED SURVEY OF THE FOLLOWING DESCRIBED REAL EST LOTS 9 AND 10 IN ASSESSOR'S DIVISION OF LOTS 18 IN SMITH'S ADDITION TO CHICAGO, SAID ADD BEING A SUBDIVISION OF BLOCKS 17 TO 22, INCLUIN THE ASSESSOR'S DIVISION OF THE SOUTH'	THE ON A TATE: 5 TO ITINO JSIVE, WEST	76	Tico Co	
FRACTIONAL 1/4 OF SECTION 22, TOWNSHIP 39 NO RANGE 14, EAS OF THE THIRD PRINCIPAL MERI WHICH SURVEY IS ATTACHED AS EXHIBIT "A" TO DECLARATION OF CONDOMINIUM RECORDED DECE 13, 2000 AS DOCUMENT 00979913, AND AS AMEI TOGETHER WITH THEIR UNDIVIDED PERCEN INTEREST IN THE COMMON ELEMENTS, IN COUNTY, ILLINOIS.  19 ABCCERO COLUMN TAXES OF ABOVE described real estate (CONTY).	DIAN; D THE MBER NDED, TAGE COOK			
(if Debtor does not have a record interest):				
	17. Check only if applicable a			<u></u>
		rustee acting with respect to prop	erty held in trust or	Decedent's Estate
	18. Check only if applicable a  Debtor is a TRANSMITTIN	<del></del>		
	<del>   </del>	Manufactured-Home Transaction	— effective 30 years	
	:=	Public-Finance Transaction — ef	*	
		Harland E	inancial Solutions	

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	C FINANCING		ENT ADDENDUM						
			N RELATED FINANCING STAT	EMENT		•			
	9a. ORGANIZATION'S NA THE RELIAE	AME		· · · · · · · · · · · · · · · · · · ·					
OR	9b. INDIVIDUAL'S LAST I	NAME	FIRST NAME	MIDI	DLE NAME, SUFFIX				
10.	MISCELLANEOUS:		<u> </u>						
		000	·						
		(1)				THE ABOVE	SPACE	IS FOR FILING OF	FICE USE ONLY
11.			LEGAL NAME - insert only one of	lebtor name	(11a or 11b) - do no	t abbreviate or comb	ine names		
	11a. ORGANIZATION'S N	IAME •							
OR	11b. INDIVIDUAL'S LAST	NAME	<u> </u>	FIRST NAM	WE		MIDDLE	NAME	CUETIV
				11101101	ri L		MILODLE	NAME	SUFFIX
11c.	MAILING ADDRESS		001	CITY		, ,	STATE	POSTAL CODE	COUNTRY
11d.	TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURIS	DICTION OF ORGA	ANIZATION	11g. OR		· —
12.	ADDITIONAL SEC		S or ASSIGNOR S/P'S NA	ME - isei	only one name (12a	a or 12b)			NON
	12a. ORGANIZATION'S NAME								
OR					70,				
Oit	12b. INDIVIDUAL'S LAST	NAME		FIRST NAM	ME		MIDDLE	NAME	SUFFIX
12c.	MAILING ADDRESS		.,	CITY			STATE	POSTAL CODE	COUNTRY
14. RI CI	collateral, or is filed as a Description of real estate:	fixture filing.  FOF P-22, P-2 S, AS DELINE, THE DECLA	er to be cut or as-extracted  24 AND P-44, LIMITED ATED ON THE SURVEY ARATION AFORESAID ER 00979913.	16. Additi	onal collateral descr	iption:	0	Š.	
ŋː	17-22	311-10 311-10	30-1001, 0-1033, 30-1034 143 and 130-1044						
	Name and address of a RE (if Debtor does not have a	CORD OWNER of a		Debtor is a	Trust or Tru	nd check only one bo	pect to prop	erty held in trust or	Decedent's Estate
				=		Manufactured-Home ? Public-Finance Trans;		— effective 30 years	