

UCC FINANCING STATEMENT AMENDMENT

LOAN NO: ILIL04083-RC 51-951180-07

A. NAME & PHONE OF CONTACT AT FILER [optional]

LOAN SERVICING 425-453-5301

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

FIRST MUTUAL SAVINGS BANK
P.O. BOX 1647
BELLEVUE, WA 98009

Doc#: 0534006079 Fee: \$26.50 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds Date: 12/06/2005 09:29 AM Pg: 1 of 1

	THI	E ABOVE SPACE IS FOR FILING OFFICE		
1a. INITIAL FINANCING STATEMENT FILE # DOC# 0431445000 11/9/2004		to be filed [for record] (or	1b. This FINANCING STATEMENT AMENDMENT is to to filed [for record] (or recorded) in the REAL ESTATE RECORDS.	
2. TERMINATION: Effectiveness of the "nancing Statement identified above is terminated with respect to security interest(nterest(s) of the Secured Party authorizing this Ter) of the Secured Party authorizing this Termination Statement.	
3. CONTINUATION: Effectiveness of the Filancing Statement identified continued for the additional period provided by applicable law.	d above with respect to security interest(s	of the Secured Party authorizing this Continuati	ion Statement is	
4. ASSIGNMENT (full or partial): Give name of a ssign se in item 7a or 7b	and address of assignee in item 7c; and al	so give name of assignor in item 9.		
5. AMENDMENT (PARTY INFORMATION): This An endment offects	Debtor or Secured Party of record	l. Check only one of these two boxes.		
Also check one of the following three boxes and provide appropriate information				
CHANGE name and/or address: Please refer to the detailed instruction in regards to changing the name/address of a party.	DELETE name: Give record no to be deleted in item 6a or 6b.	ADD name: Complete item 7 also complete items 7e-7g (if	a or 7b, and also item 7c; applicable).	
6. CURRENT RECORD INFORMATION:				
6a. ORGANIZATION'S NAME	7			
	10			
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
DYER	MARY	KAY		
7. CHANGED (NEW) OR ADDED INFORMATION:	46			
7a. ORGANIZATION'S NAME	780,	1 01 0 0 1	1	
FIRST MUTUAL BANK	The	de Kobekt Dafor	a 11/22/1	
OR 75. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
		7		
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY	
PO BOX 1647	BELLEVUE	WA 98009-164		
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e, TYPE OF ORGANIZATION DEBTOR	n 7t. JURISDICTION OF ORGANIZ	ATION 7g. ORGANIZATIONAL ID#, i	if any	
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			Address Control Control	
Describe collateral deleted or added, or give entire restated c	ollateral description, or describe collatera	assigned.		
		_	DC OF COOK	
THIS FIXTURE FILING COVERS A ROOFING	SYSTEM RECORDED IN	THE REAL ESTAPP RECOR	IDS OF COOK	
COUNTY, IL.	HICA CO H 40410	PARCEL: 25-03-212-040-0000		
SITUS/ADDRESS: 452 EAST 89TH STREET, CLEGAL DESCRIPTION: ALL INTEREST IN T				
COUNTY OF COOK, IN THE STATE OF ILLIN				
IN BLOCK 33 IN G.E. CROSS' SUBDIVISION O				
ADDITION BEING A SUBDIVISION OF THE V				
NORTH, RANGE 14, EAST OF THE THIRD PR			NOTH 37	
HORIH, RANGE 14, EAST OF THE THREE I		eoon coom, i, iiiiii (ois.		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING TH	S AMENDMENT (name of assignor, if thi	s is an Assignment). If this is an Amendment auth	norized by a Debtor which	
adds collateral or adds the authorizing Debtor, or if this is a Termination auth	orized by a Debtor, check here 🔲 and en	ter name of DEBTOR authorizing this Amendme	nt.	
9a. ORGANIZATION'S NAME				
Sierra View Holdings Inc.				
96. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
10 ODTIONAL EILER REFERENCE DATA				