UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

JAY R. GOLDBERG 312-408-7200

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

MARK J. HELFAND LAW OFFICES OF MARK J. HELFAND, P.C. 180 NORTH LaSALLE STREET **SUITE 1916** CHICAGO, II 60601

0621226175 Fee: \$26.00 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds Date: 07/31/2006 02:27 PM Pg: 1 of 2

1a. INITIAL FINANCING STATEMENT FILE .		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMEN			
C511814006		to be filed [for record] (or record)	recorded) in the		
2. TERMINATION: Effectiveness of the Financing Catement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.					
3. CONTINUATION: Effectiveness of the Financiar Streament identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by Explicable law.					
4. ASSIGNMENT (full or partial): Give name of assignee in the management of assignee in item 7c; and also give name of assignor in item 9.					
5. AMENDMENT (PARTY INFORMATION): This Amendment affec's Debtor or Secured Party of record. Check only one of these two boxes.					
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.					
CHANGE name and/or address: Give current record name in item 6a or 6i; name (if name change) in item 7a or 7b and/or new address (if address change)	also give new DELETE name: Give recort to be deleted in item 6a or 0	d name ADD name: Complete ite. 6b. ADD name: Complete ite.	m 7a or 7b, and als		
6. CURRENT RECORD INFORMATION: [6a. ORGANIZATION'S NAME]					
GE. ORGANIZATION'S NAME					
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME.	MIDDLE NAME			
	THO TANKE	WIDDLE NAME	SUFFIX		
7. CHANGED (NEW) OR ADDED INFORMATION:					
7a. ORGANIZATION'S NAME					
OP	4				
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY		
		4 /			
			[
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORG 11 IZATIONAL ID #, if a	ıny		
ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. ORC 11 "IZATIONAL ID #, if a	_		
ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box.		10.	_		
ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral	eral description, or describe collateral assig	gned.	4		
8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral Unit No. 1, in 6620 South St. Lawrence Condominium	eral description, or describe collateral assigns, as delineated on a plat of survey	gned.	tract of land		
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UCC FINANCING STATEMENT AMENDMENT ADDENDUM					
FOL	LOW INSTRUCTIONS (front and back	ck) CAREFULLY			
11.	INITIAL FINANCING STATEMENT F	ILE # (same as item 1a on Ame	endment form)		
	0511814006				
12.	NAME OF PARTY AUTHORIZING	THIS AMENDMENT (same as	item 9 on Amendment form)		
	12a. ORGANIZATION'S NAME				
OR	ALSJ, INC.				
ŲΚ	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX		

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

NAME OF DEBTOR. B & B PROPERTIES II L.L.C.

NAME OF ADDITIONAL SECURED PARTIES
AUTHORIZING THIS AMENDMENT:
DJ FAMILY LLC
MILTON GRIN
JAMES BADZIN