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Doc#: 0716539022 Fee: \$26.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 06/14/2007 09:08 AM Pg: 1 of 2 UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER (optional) LAUREN TENNANT B. SEND ACKNOWLEDGMENT TO: (Name and Address) Corporation Service Company P.O. Box 2969 Springfield, IL 62708 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT IS to INITIAL FINANCING STATEMENT FIL! # to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. 0021003278 09/12/2002 TERMINATION: Effectiveness of the Finan ing Sament identified above is terminated with respect to security interest(e) of the Secured Party authorizing this Termination Statement. 3. CONTINUATION: Effectiveness of the Financing size ...nent Identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. 4. ASSIGNMENT (full or partial): Give name of assignee in term /a 1/16 and address of assignee in item 7c; and also give name of assignor in item 9. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Library of Secured Party of record. Check only gag of these two boxes. Also check one of the following three boxes and provide appropriate inform, tion in nems 8 and/or 7. CHANGE name and/or address: Give current record name in item 6a or too, a* a g. re new name (if name change) in item 7a or 7b and/or new address (if address chan, e) in item 7c DELETE name: Give record name to be deleted in item 6a or 6b. 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME BARTOLINI'S RESTAURANT, INC. 66, INDIVIDUAL'S LAST NAME TRST NAM SUFFIX MIDDLE NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a ORGANIZATION'S NAME 76. INDIVIDUAL'S LAST NAME IRST NAME MIDDLE NAME SUFFIX 7c, MAILING ADDRESS POSTAL CODE COUNTRY 76. TAXID#: SSNOREIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION y. OF JAN ZATIONAL ID #, If any ORGANIZATION 58201582 NONE 8. AMENDMENT (COLLATERAL CHANGE): check only one box Orgina Describe collateral describe collateral description, or describe collateral description, or describe collateral assigned, 9. 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 which adds collisteral or adds the authorizing Debtor, or if this is a Terminotion authorized by a Debtor, check here 9a. ORGANIZATION'S NAME FOUNDERS BANK OR 8b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SHEFIX

10. OPTIONAL FILER REFERENCE DATA

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BLOCK 15 (EXCEPT THE WEST 120 FEET THEREOF AND EXCEPT THE EAST 17 FEET THEREOF AND THE SOUTH 125 FEET OF THE WEST 75 FEET OF THE FAST 92 FEET) IN MANUS MIDLOTHIAN PARK SUBDIVISION IN THE NORTHEAST ¼ OF SECTION 10, TOWNSHIP 36 NORTH, RANGE 13 EAST OF THE THIRD PRINICPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

P.I.N. 28-10-214-016 C/K/A 14420 SOUTH PULASKI,
MIDLOTHIAN, IL 60445