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| JCC FINANCING STATEMENT AME OLLOW INSTRUCTIONS (front and back) CAREFULLY | ·-··· | 0/2530310/ | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------|---------------------------|--|--|
| A. NAME & PHONE OF CONTACT AT FILER [optional] | | Doc#: 0725303107 Fee: Eugene "Gene" Moore RHSP F | | | |
| PAYOFF DEPT., 212-850-4707 | | Dook County Recorder of Deed | | | |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address) | | Date: 09/10/2007 11:28 AM Pg | | | |
| | i | | | | |
| EMIGRANT FUNDING CORP., | 1 | | | | |
| 5 EAST 42ND STREET NEW YORK, NY10017 | | | | | |
| 10KK, N11001/ | | | | | |
| | | | | | |
| | ı | | | | |
| | THE AS | BOVE SPACE IS FOR FILING OFFICE | T 110 T 0 111 1 | | |
| A. INITIAL FINANCING STATEMENT FILE # | · · · · · · · · · · · · · · · · · · · | 1b. This FINANCING STATE | | | |
| FILE # 0624045117 FILLD 18/28/2006 I | L- COOK COUNTY | to be filed [for record] (d | r recorded) in the | | |
| TERMINATION: Effectiveness of the Lina, Jing Statement in | entified above is terminated with respect to security interes | st(s) of the Secured Party authorizing this Te | rmination Statement | | |
| CONTINUATION: Effectiveness of the Financing Statemer continued for the additional period provided by applicable law. | t identified above with respect to security interest(s) of the | he Secured Party authorizing this Continual | tion Statement is | | |
| | | | | | |
| ASSIGNMENT (full or partial): Give name of assignee inter AMENDMENT (PARTY INFORMATION): This Amendment | | | | | |
| Also check one of the following three boxes and provide appropriate | infor nation in items 6 and/or 7. | eck only one of these two boxes. | | | |
| CHANGE name and/or address: Please refer to the detailed instructi in regards to changing the name/address of a party. | ons DELETE name: Give record name | ADD name: Complete item 7 | a or 7b, and also item 7c | | |
| CURRENT RECORD INFORMATION: | to be deleted in item 6a or 6b. | ADD name: Complete item 7 also complete items 7e-7g (if | applicable). | | |
| 6a. ORGANIZATION'S NAME | 7 | | | | |
| 6b. INDIVIDUAL'S LAST NAME | | | | | |
| BERNARD | FIRST N ME | MIDDLE NAME | SUFFIX | | |
| CHANGED (NEW) OR ADDED INFORMATION: | ZACHARY | | | | |
| 7a. ORGANIZATION'S NAME | 4 | | | | |
| | 17, | | | | |
| 7b, INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX | | |
| | | | 001111 | | |
| MAILING ADDRESS | СІТУ | STATE POSTAL CODE | COUNTRY | | |
| SEEINSTRUCTIONS ADDILINFO RE 17e TYPE OF ORGA | | | | | |
| of Applicable ORGANIZATION | NIZATION 7f, JURISDICTION OF ORGANIZATION | g. ORGANIZATIONAL ID#, if | any | | |
| DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one bo | | 2) | NONE | | |
| escribe collateral deleted or deddd as give agis. | x | | | | |
| escribe collateral deleted or added, or give entire re- | | | | | |
| | | | | | |
| Record & Return To: | PIN # 14-31 | -400-048-0 | 000 | | |
| EMIGRANT BANK | (p ₁ A /// 8. | | C) | | |
| 5 E. 42nd Street | | | | | |
| · | | | | | |
| New York, NY 10017 | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| AME OF SECURED PARTY OF RECORD AUTHORISM | | Assignment). If this is an Amendment author | ized by a Debtor which | | |
| AME OF SECURED PARTY OF RECORD AUTHORIZIN ds collateral or adds the authorizing Debtor, or if this is a Terminatic | S THIS AMENDMENT (name of assignor, if this is an A | - A DERTOR | | | |
| | G THIS AMENDMENT (name of assignor, if this is an A on authorized by a Debtor, check here and enter name | e of DEBTOR authorizing this Amendment. | | | |
| AME OF SECURED PARTY OF RECORD AUTHORIZING dots collateral or adds the authorizing Debtor, or if this is a Termination of the second sec | and enter name | e of DEBTOR authorizing this Amendment. | | | |
| 9a. ORGANIZATION'S NAME | and enter name | e of DEBTOR authorizing this Amendment MIDDLE NAME | | | |
| DA ORGANIZATION'S NAME EMIGRANT FUNDING CORPORATION DE INDIVIDUAL'S LAST NAME | and enter name | e or DEBTOR authorizing this Amendment. | SUFFIX | | |
| a ORGANIZATION'S NAME EMIGRANT FUNDING CORPORATION | and enter name | e or DEBTOR authorizing this Amendment. | | | |

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| FOLLOW INSTRUCTION | G STATEMEN ONS (front and back) | T AMENDMENT AI CAREFULLY | DDITIONAL PARTY | 1 | | | |
|---------------------------------------|----------------------------------|----------------------------------------------|--------------------------------------------------------------------------------|----------------------------------------|----------|---------------------------|------------|
| 14. INITIAL FINANCIN | G STATEMENT FILE | # (same as item 1a on Amend | ment form) | 1 | | | |
| 15. NAME OF PARTY | 117 FILED 08 | /28/2006 IL- COO S AMENDMENT (same as ite | K COUNTY | | | | |
| Tou: SIGNINGATION | I O IVAIVIE | | m 9 on Amendment form) | | | | |
| OR EMIGRANT | FUNDING CO | RPORATION | _ | Ī | | | |
| I SB. INDIVIDUAL'S L | ASTNAME | FIRST NAME | MIDDLE NAME, SUFFIX | 1 | | | |
| 16. MISCELLANEOUS | | | | l | | | |
| | 000 | | | THE ADOL | | | |
| 17. ADDITIONAL DEBT | OR'S EXACT FULL | CFCQL NAME - insert only on | e name (17a or 17b) - do not abbrevi | iste or combine par | E SPAC | E IS FOR FILING OFFIC | E USE ONLY |
| 17a ORGANIZATION'S | S NAME | 77 | , as income | iate of combine flar | iles . | | |
| OR 17b. INDIVIDUAL'S LA | STNAME | | - Islanda | | | | |
| BERNARD | <u>-</u> | Ox | FIRST NAME | | MIDDL | E NAME | SUFFIX |
| 17c. MAILING ADDRESS | | $\overline{}$ | ISABELL | | STATE | POSTAL CODE | |
| 17d SEEINSTRUCTIONS | | | | | 1917112 | POSTAL CODE | COUNTRY |
| Not Applicable | ORGANIZATION ' | 7e. TYPE OF ORGANIZATION | 11-f. JURISDICTION OF ORGAN | IIZATION | 17g. O | RGANIZATIONAL ID#, if any | , |
| 18. ADDITIONAL DEBT | OR'S EXACT FULL | FGAL NAME | name (18a c 18b) do not abbrevia | <u> </u> | | | NON |
| 18a. ORGANIZATION'S | NAME | - Insert only one | name (18a c 18b) do not abbrevia | ate or combine nam | 185 | | |
| OR 18b. INDIVIDUAL'S LAS | TALANCE . | | | | | | |
| TOD: INDIVIDUAL'S LAS | I NAME | | FIRST NAME | | MIDDLE | NAME | SUFFIX |
| 18c. MAILING ADDRESS | | | CITY | X | <u> </u> | | |
| | | | ON 1 | | STATE | POSTAL CODE | COUNTRY |
| Not Applicable | ADD'L INFO RE 18 ORGANIZATION | e. TYPE OF ORGANIZATION | 18f. JURISDICTION OF ORGANI | ZATIO, CONTRACTOR | 18g. OR | GANIZATIONAL ID #, if any | |
| | DEBTOR | | | | | | NONE |
| 19a, ORGANIZATION'S | NAME | EGAL NAME - insert only one | name (19a or 19b) - do not abbrevia | te or combine nam | s | | |
| OR | | | | | | 0 | |
| 196. INDIVIDUAL'S LAST | TNAME | | FIRST NAME | ······································ | MIDDLE | NAMF | SUFFIX |
| 19c. MAILING ADDRESS | | | | | | U _x | |
| | | | CITY | | STATE | POSTAL COUE | COUNTRY |
| 19d. SEEINSTRUCTIONS | ADD'L INFO RE 196 | . TYPE OF ORGANIZATION | 19f, JURISDICTION OF ORGANIZ | ZATION | 19a. OR | GANIZATIONAL ID #, i ab. | |
| Not Applicable | DEBTOR | | | | 1 | THE THE TENE | NONE |
| 20a. ORGANIZATION'S N | RED PARTY'S NAM | E (or Name of TOTAL ASSIGNE | E) - insert only <u>one</u> name (20a or 20 | b) | | | |
| OR | | | | | | | |
| 20b. INDIVIDUAL'S LAST | NAME | | FIRSTNAME | | MIDDLE I | NAME | SUFFIX |
| 20c. MAILING ADDRESS | | · · · · · · · · · · · · · · · · · · · | | | | _ | SOI-FIX |
| · · · · · · · · · · · · · · · · · · · | | | CITY | | STATE | POSTAL CODE | COUNTRY |
| 21. ADDITIONAL SECUR | ED PARTY'S NAMI | (or Name of TOTAL ASSIGNED | insert only <u>one</u> name (21a or 21b) insert only one name (21a or 21b) | | | | |
| 21a. ORGANIZATION'S N | AME | | ,ser. only <u>one</u> name (21a or 21b | 0) | | | |
| OR 216, INDIVIDUAL'S LAST | NAME | | I I I I I I I I I I I I I I I I I I I | | | | |
| | | | FIRST NAME | | MIDDLE | AME | SUFFIX |
| 21c. MAILING ADDRESS | | | СІТУ | | STATE | POSTAL CODE | COUNTRY |
| | ··· | | | | | | 30011111 |
| | | | | | | | |

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SCHEDULE A

Legal Description

LOT 46 IN BLOCK 39 IN SHEFFIELD'S ADDITION TO CHICAGO IN THE NORTH ½ OF THE SOUTH EAST 1/4 OF SECTION 31, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

Common Property Address: 1934 West Cortland Street, Chicago IL 60622

Permanent Tax Identification No.: 14-31-400-048-0000 Property of Coot County Clert's Office

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UNOFFICIAL CC

ILLINOIS

Mortgage # 482108-0

RELEASE OF MORTGAGE

THIS CERTIFIES that a certain mortgage executed by COSTELLA WILIAMS, UNMARRIED, to EMIGRANT MORTGAGE COMPANY, INC. dated no 4TH day of AUGUST, 2005, calling for \$100, 000.00 and duly recorded in the Record of Mortgages of COOK County, State of IUNINOIS in Record No. DOC # 0523705140 to the premises therein described as follows, to-wit:

8245 S WOLCOTT AVE, CHICAGO, IL 60620

LOT 29 (EXCEPT THE NORTH 4 F (E) THEREOF) IN BLOCK 15 IN BAIRD AND ROWLANDS SUBDIVISION OF THE WEST 1/4 OF THE NORTHEAST 1/2 OF SECTION 31, TOWNSHIP 38 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUN' Y, 1) LINOIS PIN# 20-31-226-038-0000

IS PAID and satisfied and the same is hereby release (

IN WITNESS THEREFORE, Emigrant Mortgage Company 1. c. has caused its officers to execute this Release and its corporate seal to be affixed hereto, this 10TH day of MAY, 2007.

EMI'GPANT MORTGAGE COMPANY, INC

TE OF NEW YORK

COUNTY OF NEW YORK)

I, PHILIP MCGRORY, a Notary Public in and for said County in said State, hereby certify that MICHAEL SHEAHAN, whose name as VICE PRESIDENT of Emigrant Mortgage Company, Inc. a corporation, is signed to the foregoing conveyance, and who is known to me, acknowledged before me on this day that, being informed of the contents of the conveyance he as such officer and with full authority, executed the same voluntarily for and as the act of said corporation. Given under my hand and seal of office this

This form was prepared by:

MARIA ZETES, ESQ. 5 EAST 42nd STREET

NEW YORK, NY 10017

PHILIP L. McGRORY NOTARY PUBLIC, State of New York No. 02MC5011036

Qualified in Queens County ommission Expires April 12,