## **MOFFICIAL CO**

## UCC FINANCING STATEMENT AMENDMENT

10.OPTIONAL FILER REFERENCE DATA

FILING OFFICE COPY

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER (optional) 1.520 Doc#: 0812022062 Fee: \$38.50 Eugene "Gene" Moore RHSP Fee: \$10.00 Cook County Recorder of Deeds

Date: 04/29/2008 02:27 PM Pg: 1 of 1

REORDER FROM: Pull-A-Part Business Forms

1-800-441-1020

1 CHICAGO IZ 606 40				
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
1a. INITIAL FINANCING STATEMEN FILE AD 116215048		1b. This FINANCING STATEMENT AM	1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the	
2. TERMINATION: Effectiveness of the Sinar ing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.				
3/ CONTINUATION: Effectiveness of the Fin and ig Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by a cable law.				
4. ASSIGNMENT (full or partial): Give name of assign. e in .kr., 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.				
5. AMENDMENT (PARTY INFORMATION): This Amendment of 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: Please refer to the detailed instructions in regards to changing the name/address of a party.	DELETE name: Give record name to be deleted in item 6a or 6b.	ADD name: Complete item 7s or 7b, item 7c; also complete items 7e-7g (f	and also applicable)	
6. CURRENT RECORD INFORMATION:				
6a. ORGANIZATION'S NAME				
OR Bb. INDIVIDUAL'S LAST NAME	FIRETIANS	MIDDLE NAME	SUFFIX	
DEVIE S	CREANSO			
7. CHANGED (NEW) OR ADDED INFORMATION:  [7a. ORGANIZATION'S NAME]				
78, ONOMINATION OF WHILE				
OR 75 INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
/B. INDIVIDUAL 3 DASI TAME	CZ			
		STATE POSTAL CODE	COUNTRY	
291) N. MASOR	CHICAGO	IL 60634	USA	
7d. SEE INSTRUCTIONS   ADD'L INFO RE   7. TYPE OF ORGANIZATION   DEBTOR	71. JURISDICTION OF ORGANIZATION	7), ORGANIZATIONAL ID #, if any	NONE	
8. AMENDMENT (COLLATERAL CHANGE): check only one box.		VINAL WINK	Ozis	
8. AMENDMENT (COLLATERAL CHANGE): check only one dox.  Describe collateral collateral collateral collateral description, or describe collateral				
LEGAL DESCRIPTION! LOT 26 IN BLOCK 9 IN WHITES OND DELIVER)				
PARK ADDITION, BEING, A SUBDIVISION OF BLOCKS 8 AND 9				
AND THE EAST HALF OF BLOCK 10 IN KING AND PATTERSONS SUB-				
DIVISION ACTHE NORTH EAST QUARTER OF SECTIONAY, TOWN-				
SHIP 40 NORTH RANGE 13, EAST OF THE THIRD PRINCIPAL MER-				
SHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MER-				
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 collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here				
98. ORGANIZATION'S NAME				
OR HILLICAN CIENT LAL F	TFIRST NAME	MIDDLE NAME	SUFFIX	
96. INDIVIDUAL'S LAST NAME	HAMI INTHE			

- UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)