

## **UNOFFICIAL COPY**



## UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

Anita Harney, 734-459-8825

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**National City Bank** Construction Loans 50-RF32-B7 535 S Main Street Plymouth, NI 48170

Doc#: 0835103097 Fee: \$40.25 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 12/16/2008 10:00 AM Pg: 1 of 1

4- INTIAL FRANCISCO CONTINUE C	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
MMTC RESIDENTIAL I, LLC (Document #0714133220)	1b. This FINANCING STATEMENT AMENDMEN to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.
2. TERMINATION: Effectiveness of the Finar cing systement identified above is terminated with respect to	

TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with respect to security interest(s) of t	he Secured Party authorizing this Terminatio	n Statement.
CONTINUATION: Effectiveness of the Financing statement identified above continued for the additional period provided by applicable 'aw.			
4. ASSIGNMENT (full or partial): Give name of assignee in its n 7a or 75 and	address of assignee in item 7c; and also give name	of assignor in Item 9	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor of Also check one of the following three boxes and provide appropriate information in CHANGE name and/or address: Give current record name in item 6a or 6b name (if name change) in item 7a or 7b and/or new address (if address change)	or Secured Party of record. Check only one of the terms 6 and/or 7.	nese two boxes.	7a or 7b, and also item 7g (if applicable)
6. CURRENT RECORD INFORMATION:  Ga. ORGANIZATION'S NAME			
OR 66 INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION: 7a ORGANIZATION'S NAME			
76. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
7d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any	
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			NONE

Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned

**PARTIAL RELEASE** 

DESCRIPTION: UNIT #512 ONLY, LOT 2 OF OAK LAWN TOWN CENTER RECORDED AS DOCUMEN? NUMBER 0630717112, BEING A RESUBDIVISION OF PART OF BLOCK 6 OF OAK LAWN AND PART OF BLOCK 1 OF MINNICK'S OAK LAWN IN THE NORTHWEST 1/4 OF SECTION 9, TOWNSHIP 37 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

P.I.N.: 24-09-107-016-0000, 24-09-107-017-0000, 24-09-107-032-0000, 24-09-107-033-0000

MODICAS, 4330 & COOK UD	enue c	our Lawr	1 IL 601	153		
9. NAME OF SECURED PARTY OF RECORD ALL	THORIZING TU	C AMENDMENT				
NAME of SECURED PARTY OF RECORD AU     adds collateral or adds the authorizing Debtor, or if the second secon		on authorized by a	Debtor, check here	if this is an Assignment and enter name	ent). If this is an Amendme of DEBTOR authorizing th	nt authorized by a Debtor which his Amendment.
National City Bank, a Nationa	I Banking .	Association	n			
OR 9b. INDIVIDUAL'S LAST NAME		FIRST NA			MIDDLE NAME	- OUEZW
	AGRIP	A 70 0000	T S A A M D L O		_	SUFFIX
10. OPTIONAL FILER REFERENCE DATA	JUML	- <b>\$</b> 4 ₽ - ₹**\disk**				
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FILING OFFICE COPY - NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

