JNOFFICIAL COPY

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) AC1 For AC1 Corporation Service Company SUITE 2320 33 North LaSalle Street



Doc#: 0835218098 Fee: \$38.00 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds

Date: 12/17/2008 04:19 PM Pg: 1 of 2

| 745586-1 | | THE ABOVE SPAC | E IS FOR | FILING OFFICE USE | NLY |
|--|---|------------------------------------|----------------|--|------------------------|
| 1a. INITIAL FINANCING STATEMENT F. E. 99168551 Date:02/19/1/19/) B: P: | | | 1b. This to be | FINANCING STATEMENT A filed [for record] (or recorde L ESTATE RECORDS. | MENDMENT is ed) in the |
| 2. TERMINATION: Effectiveness of the Fi. anunc Statement identified above is | terminated with respec | t to security interest(s) of the S | ecured Part | y authorizing this Terminatio | n Statement. |
| 2. TERMINATION: Effectiveness of the Fill and in Statement identified above is | S terrimated the see | rity interest(s) of the Secured F | arty author | izing this Continuation Stat | ement is |
| 2. TERMINATION: Effectiveness of the Financing statement identified above continued for the additional period provided by applicable law. | | | | | |
| ASSIGNMENT (full or partial): Give name of assignee in ite n.75 or 7b and a | address of assignee in i | em 7c, and also give name of a | ssignor in i | em 9. | |
| 5. AMENDMENT (PARTY INFORMATION): This Amendmet affects De | ebtor <u>or</u> Secured F | arty of record. Check only on | of these t | wa boxes. | |
| Also check one of the following three boxes and provide appropriate information in it | items 6 and/or 7. | | - ADDa | ame: Complete item 7a or 7b, | and also item 7c; |
| CHANCE name and/or address: Please refer to the detailed instructions | DELETE name: to be <u>deleted in</u> | Give record name em 6a or 6b. | alsoc | emplete items 7e-7g (if applica | bie). |
| in regards to changing the name/address of a party. | | | | | |
| 6. CURRENT RECORD INFORMATION: [6a. ORGANIZATION'S NAME] | 7 | | | | |
| | | | | | Taureiv |
| OR BRITTANY COURT OR B. INDIVIDUAL'S LAST NAME | FIRS. NAME | | MIDDLE | NAME | SUFFIX |
| Bb. INDIVIDUAL'S LAST NAME | 0, | | | | |
| 7. CHANGED (NEW) OR ADDED INFORMATION: | Ç | Δ | | | |
| 7a. ORGANIZATION'S NAME | | 171 | | | |
| OR 7b. INDIVIDUAL'S LAST NAME | FIRST NAME | C | MIDDLE | NAME | SUFFIX |
| 7c MAILING ADDRESS | CITY | 0, | STATE | POSTAL CODE | COUNTRY |
| | | | - OB | SANIZATIONAL ID #, if any | |
| 7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR | 7f. JURISDICTION | OFORGANIZATION | 5 | SANIZATIONAL IS II, II SIII, | NONE |
| 8. AMENDMENT (COLLATERAL CHANGE): check only one box. | toral description or de | scribe collateral assigned. | (| J _{Sc} | |
| 8. AMENDMENT (COLLATERAL CHANGE). Greek day specified collateral deleted or added, or give entire restated collateral collateral deleted or added, or give entire restated collateral colla | teral description, or de | | | | |

| NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS adds collateral or adds the authorizing Debtor, or if this is a Termination authorizing Debtor. | S AMENDMENT (name of assignor, if this is prized by a Debtor, check here and enter | s an Assignment). If this is an Amendment aut name of DEBTOR authorizing this Amendm | thorized by a Debtor which ent. |
|--|--|---|--|
| 98. ORGANIZATION'S NAME OR SOUTHERN FARM BUREAU LIFE INS 9b. INDIVIDUAL'S LAST NAME | | | SUFFIX |
| 10.OPTIONAL FILER REFERENCE DATA 330-2008133 IL-Cook County | | Corporati | on Service Company erville Rd, Ste. 400 |

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)

Corporation Service Company 2711 Centerville Rd, Ste. 400 Wilmington, DE 19808

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LOT II (EXCEPT THE WEST 26.0 PRET THEREOF) AND ALL OP LOT 12 IN MAPLESIDE SUBDIVISION OF 18 ACRES OF AND IN THE MORTHEAST & OF SECTION 28, TOWNSHIP 38 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN. SOUNDED AND DESCRIBED AS FOLLOWS TO WIT: COMMENCING AT A POINT IN THE MEST LINE OF SAID & SECTION 486.61 FRET SOUTH OF THE MORTHWEST CORNER THEREOF AND RUNNING THEMCE EAST PARALLEL WITH THE MORTH LINE OF SAID & SECTION, 2168.69 FRET; THENCE SOUTH PARALLEL WITH THE WAST TANDED & SECTION 283.94 FRET, MORE OR LESS, TO THE CENTER OF JULIET BOAD; THENCE SECTION SOUTH ALONG SAID CENTER LINE 150.00 FRET; THENCE WEST PARALLEL WITH THE MORTH LINE OF SAID & SECTION 2037.87 FRET; MORE OR LESS, TO THE WEST LINE OF SAID & SECTION, AND THEMCE NORTH (LONG THE WEST LINE 363.77 FRET TO THE PLACE OF BEGINNING, IN COOK COUNTY, ILLINOIS.

Pin # 18-20-200-083-0000 Thru 089 6890

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