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UCC FINANCING STATEMENT AMENDMEN	г 🎉 📗		
FOLLOW INSTRUCTIONS (front and back) CAREFULLY		# 000T1 10T/	
A. NAME & PHONE OF CONTACT AT FILER [optional]		:#:	
CSC Diligenz, Inc. 1-800-858-5294 B. SEND ACKNOWLEDGMENT TO: (Name and Address)		County Recorder of Deeds	0.00
40244035	Date	: 02/23/2009 10:21 AM Pg: 1 o	f 2
CSC Diligenz, Inc.			
6500 Harbour Heights Pkwy, Suite 400			
Mukilteo, WA 98275	i		•
Filed to: 100 o	:- O I.		
Filed In: Illino	<u></u> -		
1a. INITIAL FINANCING STATEMENT FILE#	THE ABOVE	SPACE IS FOR FILING OFFICE US 1b. This FINANCING STATEMEN	
0419044028 07/08/200-		to be filed [for record] (or reco	
2. TERMINATION: Effectiveness of the Fin Inc. g Statement identified above is	terminated with respect to security interest(s)	FEAL ESTATE RECORDS. of the Secured Party authorizing this Termina	tion Statement
3. CONTINUATION: Effectiveness of the Financin, Statement identified above			
continued for the additional period provided by applic .bl- law.	with respect to assumy interest(s) of the De	somed Fairy audionzing this continuation o	tatement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and ad	dress of assignee in item 7c; and also give na	me of assignor in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debt	tor or Secured Party of record. Check of	only one of these two boxes.	
Also check one of the following three boxes and provide appropriate infor nation in ite	ms 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 7a or 7	b, and also item 7c;
CURRENT RECORD INFORMATION:	to be deleted in item da or ob.	also complete items 7e-7g (if appli	cable).
6a. ORGANIZATION'S NAME	7		
BERMERS LLC			
OR 66. INDIVIDUAL'S LAST NAME	FIRST N, ME	MIDDLE NAME	SUFFIX
	0,		
7. CHANGED (NEW) OR ADDED INFORMATION:	9		-::
7a, ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
	()		
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
7d. SEEINSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. (小GANIZATIONAL ID #, if any	
ORGANIZATION '		0.	NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.	<u> </u>		LINONE
Describe collateral deleted or added, or give entire restated collateral	description, or describe collateral assistant	aned.	
SEE ATTACHED EXHIBIT A (1 PAGE)		gned.	
, ,			
		C	•
		*	

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 and enter name of DEBTOR authorizing this Amendment.

9a. ORGANIZATION'S NAME

Charter One, a division of RBS Citizens, NA

9b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

10. OPTIONAL FILER REFERENCE DATA

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EXHIBIT A

LOTS 9 AND 10 IN BLOCK 1 IN RIDGE LAWN SUBDIVISION OF THE EAST 10 ACRES OF THE NORTH 60 ACRES OF THE NORTHEAST QUARTER OF SECTION 36, TOWNSHIP 41 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

7132 NORTH HARLEM

CHICAGO, ILLINOIS 60631

SATION.

OR COOK COUNTY CLORES OFFICE TAX IDENTIFICATION NO. 09-36-205-037-0000 VOL. 306