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UCC FINANCING STATEMENT AMENDME FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] M. Turner 440-546-7393 B. SEND ACKNOWLEDGMENT TO: (Name and Address) NATIONAL CITY BANK 6750 Miller Road Brecksville, OH 44141	ENT O1 NIVEN	Eugene "Gene" Cook County Re	19013 Fee: \$38.0 6 Moore RHSP Fee:\$10.0 ecorder of Deeds 9 09:05 AM Pg: 1 of 2	000
1a. INITIAL FINANCING STATEMENT FILE		THE ABOVE S	SPACE IS FOR FILING OFF 1b. This FINANCING STATEM	
0423239054 dated 8/15/2504			to be filed [for record] (or REAL ESTATE RECORD	recorded) in the
2. TERMINATION: Effectiveness of the Fine cine statement identified above is	terminated with respect to s	ecurity interest(s) of the Sec		
CONTINUATION: Effectiveness of the Financir j statement identified above continued for the additional period provided by applicable (a).	with respect to security inter	est(s) of the Secured Party a	uthorizing this Continuation State	ment is
4. ASSIGNMENT (full or partial): Give name of assignee in it in 7a or 7b and ad	dress of assignee in item 7	and also give name of acci	apor in item 0	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or	Secured Party of record	f Check only one of these tw		
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate informs on 1 lite CHANGE name and/or address: Give current record name in item 6a or 6's, all name (if name change) in item 7a or 7b and/or new address (if address change)	ems 6 and/or 7.	E name: Give record name eted in item 6a or 6b.		tem 7a or 7b, and also item
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME			76, disc complete items	rrd-rg (ir applicable)
The Northern Trust Bank, as Trustee for Trust N	No. 13143 FIRST NAML		MIDDLE NAME	S _O FFIx
7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	7	X ₁		
OR 75. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME	SuFFX
Deerpath & Bank Lane	CITY LakeForest 71. JURISDICTION OF ORG		STATE POSTAL CODE L 60045 7g. ORGANIZATIONAL ID #, if an	COUNTRY USA
8. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box. Describe collateral deleted or added, or give entire restated collateral d			O _{ffi} C	L. NONE
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMEN	IDMENT (name of assign	or, if this is an Assignment). If this is an Amendment auth	orized by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authori 9a. ORGANIZATION'S NAME National City Bank of the Midweet	zed by a Debtor, check he	ere and enter name of	DEBTOR authorizing this Ame	endment.
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	٨	MIDDLE NAME	S. 57
10. OPTIONAL FILER REFERENCE DATA Filed at Cook Coun 11. Counter Number 65620	ty, IL su 01 cc	0002816		PF

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Legal Description

LOT 3 IN THE ASSESSOR'S SUBDIVISION OF LOT 6 IN GOTTFRIED KNAUSS' SUBDIVISION OF THE NORTH ½ OF BLOCK 1 AND THE WEST 100 FEET OF THE SOUTH H'LLF OF SAID BLOCK 1 IN THE SUBDIVISION BY THE COMMISSIONER'S OF THE ILLINOIS AND MICHIGAN CANAL OF THE SOUTH FRACTIONAL QUALTER OF SECTION 3, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS.

PINS:

17-03-200-074

17-03-200-075 17-03-200-076

Commonly known as 1163-1167 N. State Street, Chicago, Illinois