## **UNOFFICIAL COPY**

		9915419056		
UCC FINANCING STATEMENT <b>AMENDMEN</b>		#: 09154190	50 Fee: \$38.0	0
FOLLOW INSTRUCTIONS (front and back) CAREFULLY	Euge	ne "Gene" Moor	e RHSP Fee:\$10.	00
A. NAME & PHONE OF CONTACT AT FILER [optional]  KIM TAYLOR 800-669-4268 EXT 8064	Cook	County Records	er of Deeds	<b>)</b>
B, SEND ACKNOWLEDGMENT TO: (Name and Address)	Date:	06/03/2009 03:	00 PM Pg: 1 of 2	•
C. CLICATOR CO. (Name and Auditor)	_			
DOVENMUEHLE MORTGAGE, INC.				
COMMERCIAL SERVICING DEPT				
1 CORPORATE DRIVE, SUITE 360				
LAKE ZURICH, IL 60047				
LOAN # 1010054073				
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		BOVE SPACE IS EO	R FILING OFFICE US	E ONL V
1a. INITIAL FINANCING STATEMENT	THEM		FINANCING STATEMEN	
Ø335306061 12/40/2003		□ to b	e filed (for record) (or rec	
TERMINATION: Effectiveness of the Figure 5 statement identified above is	terminated with respect to security intere		AL ESTATE RECORDS.	ation Statement
CONTINUATION: Effectiveness of the Financing statement identified above continued for the additional period provided by apply the law.				
4.   ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and ac	dress of assignee in item 7c; and also o	ive name of assignor in	item 9.	·
5. AMENDMENT (PARTY INFORMATION): This Amendment affects   Deb				
Also check one of the following three boxes and provide appropriate infor nation in ite		TOUR DAMP STEE OF MICHO	.,,,,	
CHANGE name and/or address: Please refer to the detailed instructions	DELETE name: Give record name	☐ ADD	name: Complete item 7a or i omplete items 7e-7g (ifappl	b, and also item 7c;
in regards to changing the name/address of a party.  6. CURRENT RECORD INFORMATION:	to be deleted in item 6a or 6b.	alsoc	отрівшить ле-ла (гаррі	cable).
6a, ORGANIZATION'S NAME	92			
BOSTON SAFE DEPOSIT AND TRUST COMPAN	NV			
OR 66. INDIVIDUAL'S LAST NAME	FIRST N ME	MIDDLE	NAME	SUFFIX
7. CHANCED INFORMATION				
7. CHANGED (NEW) OR ADDED INFORMATION:  [7a. ORGANIZATION'S NAME]				
7a. ORGANIZATION'S NAME	The state of the s			
L. Charles	FIRST NAME	MIDDLE	NAME	SUFFIX
7a. ORGANIZATION'S NAME BNY MELLON, N.A.	FIRST NAME	MIDDLE	NAME	SUFFIX
7a. ORGANIZATION'S NAME  BNY MELLON, N.A.  7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
OR To INDIVIDUAL'S LAST NAME  To MAILING ADDRESS	СПУ	STATE	POSTAL CODE	COUNTRY
7a. ORGANIZATION'S NAME BNY MELLON, N.A. 7b. INDIVIDUAL'S LAST NAME  7c. MAILING ADDRESS  201 WASHINGTON STREET		STATE		COUNTRY
7a. ORGANIZATION'S NAME  BNY MELLON, N.A.  7b. INDIVIDUAL'S LAST NAME  7c. MAILING ADDRESS  201 WASHINGTON STREET  7d. SEEINSTRUCTIONS   ADD'L INFO RE ORGANIZATION ORGANIZATION ORGANIZATION	CITY BOSTON	STATE	POSTAL CODE 02108-4408	COUNTRY USA
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## UNOFFICIAL COPY

## LEGAL DESCRIPTION

LOTS 44 AND 45 IN ALLMENDINGER'S LAKE SHORE DRIVE ADDITION TO CHICAGO, A SUBDIVISION OF PART OF BLOCK 13 IN THE CANAL TRUSTEE'S SUBDIVISION OF THE SOUTH FRACTIONAL ¼ OF SECTION 3, TOWNSHIP 39 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office