NOFFICIAL COPY

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY	NT	1016034006		
A. NAME & PHONE OF CONTACT AT FILER [optional]		Oc#: 1016034006 Fee: \$40.00 Eugene "Gene" Moore RHSP Fee:\$10.00		
Phone (800) 331-3282 Fax (818) 662-4141		Recorder of Deeds	
B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 15795 BAYVIE	EW SERVIC)ate: 06/09/2	2010 08:30 AM Pg:	1 of 3
CT Lien Solutions 2353895	54			
P.O. Box 29071				
Glendale, CA 91209-9071				
FIXTUR	E /	·		•
		THE ABOVE SPACE IS	FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE # 0516022200 06/05/05 CC IL Cook+	•	√ to be	FINANCING STATEMENT. e filed (for record) (or recorde L ESTATE RECORDS.	AMENDMENT is ed) in the
2. TERMINATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by a split able law. 4. ASSIGNMENT (full or partial): Give name of assignet in item 7a or 7b 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debt Also check one of the following three boxes and provide appropriate inform CHANGE name and/or address: Give current record name in item 3a or 6b; also gname (if name change) in item 7a or 7b and/or new address (if address analyse) 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S LAST NAME HADDAD 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	with respect to the security interest(s) and address of assignee in 7c; a or or Secured Party of record. nation in items 6 and/or 7. give new DELETE name: G	of the Secured Party authors of also give name of a Check only one of these ive record name	ssignor in item 9. two boxes. ADD name: Complete item 7c; also complete items	a or 7b. and also
90	4			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE N.	AME	SUFFIX
7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
7d. SEE INSTRUCTION ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATI	ON 7g. ORGAI	NIZATIONAL ID #, if any	NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collater Parcel ID: 32-20-407-040	'al description, or describe collater	al assigned.	IFICO .	

	•			s 5
	IAME OF SECURED PARTY OF RECORD AUTHORIZ adds collateral or adds the authorizing Debtor, or if this is a Ter		an Assignment). If this is an Amendment author ter name of DEBTOR authorizing this Amendmen	
OR	99. ORGANIZATION'S NAME BAYVIEW LOAN SERVICING	, LLC		S N
	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

10. OPTIONAL FILER REFERENCE DATA

23538954 Debtor Name: Haddad, Deanna 200033098 29115

Prepared by CT Lien Solutions, P.O. Bo Giendale, CA 91209-9071 Tel (800) 331-3

331-3282 INT W

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UC FOI	C FINANCIN LOW INSTRUC	G STATEME TIONS (front and	NT AMENDME back) CAREFULLY	NT ADDENDUM			
11.	INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)						
05	16022200	06/09/05	CC IL Cook+				
12. NAME of PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)							
	BAYVIEW LOAN SERVICING, LLC						
OR	12b. INDIVIDUAL'S L	AST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
13.	Use this space for	additional informa	ation				

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 2-20-407-040

LOX COOK COUNTY CROPTS OFFICE

Description: see attached. Parcel ID: 32-20-407-040

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LOT 7 IN SUBDIVISION OF LOTS 18 THROUGH 31 IN BLOCK 78 IN CHICAGO HEIGHTS, IN THE SOUTH EAST 1/4 OF SECTION 21, TOWNSHIP 25 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Commonly known as: 275 EAST 16TH STREET
CHICAGO HEIGHTS, 1L 60411

Property of Cook County Clerk's Office