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Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 06/30/2010 10:04 AM Pg: 1 of 55

FIRST AMENDMENT TO
DECLARATION OF
CONDOMINIUM OWNERSHIP
AND BY-LAWS, EASEMENTS,
RESTRICTIONS AND
COVENANTS FOR BUNKER
HILL CLUB CONDOMINIUM

This Amendment to the Declaration of Condominium Ownership And By-Laws, Easements, Restrictions And Covenants For Bunker Hill Club Condominium Association, made and entered into this 1st day of April, 2010, by at the Board of Managers of Bunker Hill Club Condominium Association (hereinafter referred to as the "Board") and at least three-fourths (3/4) of the Unit Owners.

WITNESSETH

WHEREAS, by a certain Declaration of Condominium Ownership and By-Laws, Easements, Restrictions and Covenants For the Bunker Hill Club Condominium, filed in the Office of the Recorder of Deeds of Cook County, Illinois, on the 21st day of September, 1993, as Document No. 93756546 (hereinafter referred to as "Declaration") the real estate legally described in Exhibit A attached to the Declaration, and as set forth in Exhibit A attached hereto, was submitted to the Condominium Property Act of the State of Illinois, and to the covenants, conditions, rights, and restrictions set forth in that Declaration; and

WHEREAS, the Declaration, Article XIX, Section 6, provides that the Declaration may be amended, changed, or modified by an instrument in writing setting forth such amendment, change, or modification, signed and acknowledged by the Board and by at least three-fourths

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(3/4) of the Unit Owners, and containing an affidavit by an officer of the Board certifying that a copy of the amendment, change or modification has been mailed by certified mail to all mortgagees having bona fide liens of record against any unit, not less than ten (10) days prior to the date of such affidavit; and

WHEREAS, the Board and Unit Owners deem it desirable to restrict the leasing of units and to require that Units be owner occupied; and

WHEREAS, the Board and Unit Owners desire to reserve to the Board of Managers of the Condominium the authority, in their sole and absolute discretion, to lease units owned or possessed by the Board or by the Bunker Hill Club Condominium Association; and, further,

WHEREAS, the Board and Unit Owners desire to prohibit maintaining or keeping of any and all pets in any Unit or anywhere on the Association Property; and, further,

WHEREAS, the Board and Unit Owners desire to correct an obvious omission and/or error in the Declaration, Article IV, entitled "General Provisions as to Units and Common Elements", at Section 5, the third paragraph, in that certain words are obviously missing to conform that provision to Section 9(e) of the Illinois Condominium Property Act, which specifically provides and states that "The condominium instruments may provide for the assessment, in connection with expenditures for the limited common elements, of only those units to which the limited common elements are assigned"; and

WHEREAS, the Board and the Unit Owners desire to amend the Declaration so as to implement the foregoing desires;

NOW THEREFORE, the Board of Managers and at least three-fourths (3/4) of the Unit Owners do hereby amend the Declaration as follows:

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I. Article IV of the Declaration, entitled "General Provisions As To Units And Common Elements", is hereby amended by adding the phrase ", of only those units to which the limited common elements" to the last sentence of the third paragraph, so that the paragraph reads as follows:

Pursuant to the Illinois Condominium Act, the Developer or the Board of Managers may provide for assessment, in connection with expenditures for the Limited Common Elements, of only those Units to which the Limited Common Elements are assigned.

II. Article IX of the Declaration, entitled "Sale, Lease or Other Alienation", is hereby amended at Section 1, entitled "Sale or Lease", by amending and changing Section 1 by deleting the existing language and replacing Section 1 with the following language as Section 1(A) entitled "Sale" and Section 1(B) entitled "Leasing of Units Prohibited" as follows:

1(A). Sale. Any Unit Owner other than the Trustee who wishes to sell his unit ownership shall give to the Board not less than thirty (30) days' prior written notice of his intent to sell and subsequently, the terms of any contract to sell, entered into subject to the Board's option as set forth hereinafter, together with a copy of such contract, the name, address and financial and character references of the proposed purchaser and such other information concerning the proposed purchaser as the Board may reasonably require. The members of the Board acting on behalf of the other Unit Owners shall at all times have the first right and option to purchase such unit ownership upon the same terms, which option shall be exercisable for a period of thirty (30) days following the date of receipt of such notice (except that said option shall not apply in a situation involving a foreclosure to take title pursuant to a mortgage, in a situation whereby a mortgagee takes a deed in lieu of foreclosure in the event of a default by a mortgagor, or to a sale of a unit acquired by a mortgagee or its assignee). If said option is not exercised by the Board within said thirty (30) days, the Unit Owner may, at the expiration of said thirty (30) day period and at any time within ninety (90) days after the expiration of said period, proceed to consummate the sale of such unit ownership to the proposed purchaser named in such notice upon the terms specified therein. If the Unit Owner fails to close said proposed sale transaction within said ninety (90) days, the Unit Ownership shall again become subject to the Board's right of first refusal as herein provided.

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1(B). Leasing of Units Prohibited. (i) A Unit Owner may not lease the Unit owned during the entire period of Unit Ownership except as allowed by Subparagraphs (i) through (v) of this Section 1(B), and except that each Unit Owner leasing a Unit on the effective date of this Amendment may continue to lease or rent that Unit to the current tenant/resident pursuant to the lease in place on the effective date of this Amendment for a period no later than one (1) year after the effective date of this Amendment. If any Unit is permitted to continue being leased pursuant to this Section 1(B)(i) for the time period allowed herein (but in no event longer than one year), the right to lease shall terminate if the Unit Ownership is sold or conveyed to a third party during that period or if the current tenant/resident on the effective date of this Amendment vacates the Unit during that period. Upon the expiration of the time period allowed herein, but in no event more than one (1) year after the effective date of this Amendment, or upon the sale or conveyance of the Unit to a third party prior to the expiration of this time period, or if the current tenant/resident shall vacate the premises prior to the expiration of the allowed time period, then rental or leasing of that Unit which had been rented or leased on the effective date will no longer be allowed, it being required that the Unit thereafter be occupied by the Unit Owner in accordance with this Section 1(B). Any Unit which was not rented or leased or occupied by a person or persons other than the Unit Owner (and persons with the Owner) on the effective date of this Amendment, may not be rented or leased for any time period or under any circumstances or occupied by persons other than permitted by this Amendment after the effective date of this Amendment except as otherwise provided in Subparagraph (i) through (v) of this Section 1(B). All leases in effect on or before the effective date of this Amendment, and all leases in effect and permitted after the effective date, shall be subject to the Declaration and By-Laws, this Amendment, all prior and subsequent Amendments, the Condominium Property Act now in effect and as amended from time to time, provided, however, that no changes to the Condominium Property Act will allow leasing as prohibited herein. All permitted tenants and occupants shall be subject to the Declaration, By-Laws, Amendments, all Rules and Regulations in effect at the time of this Amendment or as amended by the Board from time-to-time and to the Act, provided, that no changes to the Condominium Property Act which allow leasing as prohibited therein shall supersede this provision. The Rules and Regulations in effect at the time of this Amendment shall be deemed incorporated herein by this reference and shall be deemed reasonable in all respects by all Owners lessees, occupants and tenants and by any court of competent jurisdiction. The Board shall have sole and absolute discretion to determine if a change in Ownership, sale of the Unit to a third party, or other transfer has occurred with respect to a Unit and/or the Unit Ownership which would prohibit further leasing or occupancy by this provision, and the Board's determination shall not be subject to challenge or judicial review and shall be final and binding upon the Unit and the Unit Ownership.

(ii) A Unit shall not be leased or occupied except as allowed or authorized in Subparagraphs (i) through (v) of this Section 1(B). The Unit occupant must be the Unit Owner (and persons residing with the Owner), and/or the Unit Owner's mother,

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father, son, daughter, sister or brother (and persons residing with each of them). No other person may occupy and reside in the Unit except as permitted by this Section 1(B), and Units may not be leased or rented to any person, including, but not limited to, family of the Unit Owner. For purposes of this Section 1(B), if the Unit Ownership is a corporation, the occupant must be a shareholder of the corporation who owns at least twenty-five (25%) percent of the stock of the corporation; if the Unit Ownership is a Limited Liability Corporation (an "LLC"), the occupant must be a member of the LLC; if the Unit Ownership is a partnership, the occupant must be a partner of the partnership; and if the Unit Ownership is a trust, the occupant must be the trustee or a beneficiary of the trust. Upon request by the Board, the Owner must provide to the Board sufficient information, documentation and evidence that the person who occupies or will occupy the Unit is a person permitted and authorized by this Subsection 1(B)(ii), and the Board shall have sole discretion to determine whether or not any person is permitted or authorized to occupy a Unit in accordance with this provision.

(iii). Notwithstanding the provisions of Subparagraph (i), with respect to any Unit which the Association or Board has or shall have possession or an Ownership interest, the Board shall have the authority to lease the Unit to any person, exempt from and without complying with the lease restrictions or any provision of these Subparagraphs (i) through (v) whenever the Board shall determine, in its sole and absolute discretion, that the interest of the Association would be served thereby.

(iv). The Board shall have the authority at its sole discretion to adopt such Rules and Regulations it deems necessary to administer, enforce and supplement the provisions of Section 1(B), including subparagraphs (i) through (v), but the absence of any such Rules and Regulations shall not prevent the Board from administering or enforcing the provisions of Section 1(B), including subparagraphs (i) through (v). Any such Rules and Regulations shall be deemed reasonable. The Board shall have the right to establish Rules and Regulations limiting the number of persons occupying, residing or staying in a Unit.

(v). In the event that a Unit or any interest therein is leased or occupied in violation of this Section 1(B), including subparagraphs (i) through (v), such lease or occupancy shall be void, and the Board shall have the right to enforce the restrictions, limitations, prohibitions or conditions set forth in Section 1(B) or other provisions of the Declaration and By-Laws, Rules and Regulations, and the Act by any proceeding at law or in equity, and may pursue any or all of the remedies set forth in the Declaration, By-Laws and Rules and Regulations, including, but not limited to, Forcible Entry & Detainer actions to obtain possession of the Unit and injunctive or other relief. All expenses of the Board or Association incurred in connection with enforcement of Section 1(B), including subparagraphs (i) through (v), or with such actions and proceedings including all attorneys' fees court costs, other fees and expenses, and all damages, liquidated or otherwise, together with interest thereon at the maximum legal

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rate until paid, incurred prior to, during, and after such actions or proceedings, shall be charged to and assessed against the defaulting Owner, and shall be added to and deemed a part of the Owner's respective share of the common expenses, and the Board shall have a lien for all of the same upon the Unit and the Owner and upon all of the Owner's personal property in the Unit or located elsewhere on the property.

III. Article XVII of the Declaration, entitled "Covenants And Restrictions As to Use And Occupancy", is hereby amended at Section 7, entitled "Pets", by amending and changing Section 7 by deleting the existing language and replacing Section 7 with the following language:

7. Pets. No pets, household pets, animals, rabbits, livestock, fowl, poultry or other animal of any kind shall be raised, bred, kept or maintained in any Unit or in the Common Elements at any time. All pets and animals are prohibited from being kept or brought on the Association property at any time. These restrictions shall not apply to prohibit the keeping or bringing on the property a necessary and qualified animal for purposes of reasonably accommodating a disability, to the extent required by law.

This Amendment shall be effective upon filing with the Recorder of Deeds of Cook County, Illinois.

IN WITNESS WHEREOF, the undersigned Board members have hereunto set their hands and seals on this First Amendment To Declaration the day and date first written above.

BOARD OF MANAGERS OF BUNKER HILL
CLUB CONDOMINIUM ASSOCIATION

Joyce L. Kissinger
President

Rita W. Giersch
Vice-President

Nancy Olejnik
Secretary

Treasurer

Richard C. Maslo
Director

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SIGNATURE PAGE FOR FIRST AMENDMENT TO DECLARATION OF CONDOMINIUM OWNERSHIP FOR BUNKER HILL CLUB CONDOMINIUM ASSOCIATION TO RESTRICT LEASING AND PETS

The undersigned personally and as unit owners(s) by signing this document hereby approve, acknowledge, authorize, and accept the First Amendment to the Declaration of Condominium Ownership for Bunker Hill Club Condominiums Association and all of its contents to restrict the leasing of units, to prohibit pets, and to correct missing language regarding limited common elements, and authorize detachment of this signature page from the copy to which it is attached and to attach this signature page to the Amendment to be recorded.

UNIT OWNER

UNIT/ADDRESS

Maria Kolasz

6701 N Milwaukee AVE Apt 201

Signature
MARIA KOLASZ

Unit 20 60714

Printed Name

PIN NO.

Signature

1001

Printed Name

1.6270

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

1.6270

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UNIT OWNER UNIT/ADDRESS

Betty Veelck # 202
Signature Betty Veelck

Printed Name

PIN NO.

Marjorie Meier
Signature Marjorie Meier
Printed Name

18-31-401-042-1002

1.54%

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Geraldine Elder
Signature
GERALDINE ELDER
Printed Name

#205 6701 N. MILWAUKEE
NILES, IL. 60714

PIN NO.

10-31-401-D42-1005

Signature

Printed Name

Signature

Printed Name

1.89%

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Lorraine Kapela
Signature
Lorraine Kapela
Printed Name

6701 Milwaukee #206
Niles Illinois 60714

PIN NO.

10-31-401-042-1006

Raymond Kapela
Signature
Raymond Kapela
Printed Name

1.89

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Blanca R. Gonzalez
Signature
BLANCA R. GONZALEZ
Printed Name

6701 N. Milwaukee Ave # 207
NILES IL 60714-4418

PIN NO.

Signature

10-31-401-042-1007

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name:
Street/P.O. Box:
City/State/Zip:
Mortgage Number:

Bank
Liberty Loan Services -
2392 Milwaukee Ave
Chicago IL 60647
Acct # 10-21400312

Financial Institution Full Name:
Street/P.O. Box:
City/State/Zip:
Mortgage Number:

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UNIT/OWNER

UNIT/ADDRESS

Signature

Printed Name

Signature

Printed Name

Signature

Printed Name

PIN NO.

10-31-401-042-1008

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name:

Street/P.O. Box:

City/State/Zip:

Mortgage Number:

PNC

Financial Institution Full Name:

Street/P.O. Box:

City/State/Zip:

Mortgage Number:

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UNIT OWNER

UNIT/ADDRESS

Ki Yong Kang
Signature
KI YONG KANG
Printed Name

679 N. MILWAUKEE, # 209
NILES, IL 60714

OK Jin Kang
Signature
OK JIN KANG
Printed Name

PIN NO.

10-31-401-042-1009

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Henryka F. Jakaeka
Signature
HENRYKA F. JAKAeka
Printed Name

6701 N. MILWAUKEE AVE, APT 210
NILES, IL 60714

PIN NO.

Signature

1010

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Rita H Giersch
Signature
RITA H GIERSCH
Printed Name

6701 A Milwaukee #301
Alex IL 60714

PIN NO.

10-31-401-042-1011

Signature

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Stephanie Dow
Signature
STEPHANIE DOW
Printed Name

6701 N. MILWAUKEE AVE #302
NILES, IL 60714

PIN NO.

10-31-401-042-1012

Signature

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Gloria A. Swanson
Signature
GLORIA A. SWANSON
Printed Name

6701 N. MILWAUKEE UNIT 303
NILES, IL. 60714

PIN NO.

Signature

Printed Name

10-31-401-042-1013

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Walter D. Zuh

6701 N. Milwaukee #304

Signature
Walter D. Gembala

Niles, Illinois 60714

Printed Name

Frank A. Gembala

PIN NO.

10-31-401-042-1014

Signature
Frank A. Gembala

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

N/A

Financial Institution Full Name:

Street/P.O. Box:

City/State/Zip:

Mortgage Number:

Financial Institution Full Name:

Street/P.O. Box:

City/State/Zip:

Mortgage Number:

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UNIT OWNER

UNIT/ADDRESS

Krzysztof Ratajczyk
Signature

6701 N Milwaukee

KRYSZYNA RATAJCZYK
Printed Name

305

PIN NO.

Signature

10-31-401-042-1015

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Joyce L. Kissinger
Signature
Joyce L. Kissinger
Printed Name

6701 N. Milwaukee Ave #306
Niles, IL 60714

PIN NO.

10-31-401-042-1016

Signature

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name:
Street/P.O. Box:
City/State/Zip:
Mortgage Number:

U.S. Bank Home Mortgage
4801 Frederica ST.
Owensboro, KY 42301
7810399446

Financial Institution Full Name:
Street/P.O. Box:
City/State/Zip:
Mortgage Number:

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SIGNATURE PAGE FOR FIRST AMENDMENT TO DECLARATION OF CONDOMINIUM OWNERSHIP FOR BUNKER HILL CLUB CONDOMINIUM ASSOCIATION TO RESTRICT LEASING AND PETS

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UNIT OWNER

UNIT/ADDRESS

Casimira Szawica

308 6701 N Milwaukee Ave

Signature

CASIMIRA SZAWICA

Niles, IL 60714

Printed Name

PIN NO.

Signature

10-31-401-042-1018

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Edmund Itner
Signature
Edmund ITNER
Printed Name

6701 N. Milwaukee # 309
Niles IL. 60714

Adele Itner
Signature
Adele ITNER
Printed Name

PIN NO.

10-31-401-042-1019

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

James C. Grant
Signature
JAMES C. GRANT

6701 N. MILWAUKEE Ave #310
NILES, IL 60714-5420

Printed Name

PIN NO.

Signature

10-31-401-042-1020

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name:
Street/P.O. Box:
City/State/Zip:
Mortgage Number:

CHASE Home FINANCE LLC
3415 Vision DRIVE
Columbus, OHIO #3219
1766021878

Financial Institution Full Name:
Street/P.O. Box:
City/State/Zip:
Mortgage Number:

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UNIT OWNER

UNIT/ADDRESS

ZIFO HADZIBULIC

6701 N. MILWAUKEE AVE #401

Signature

ZIFO HADZIBULIC

NILES, IL 60714

Printed Name

PIN NO.

Sacira Hadzibulic

10-31-401-042-1021

Signature

SACIRA HADZIBULIC

Printed Name

M Hadzibulic

Signature

SEAD HADZIBULIC

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name:

Street/P.O. Box:

City/State/Zip:

Mortgage Number:

- NONE -

Financial Institution Full Name:

Street/P.O. Box:

City/State/Zip:

Mortgage Number:

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UNIT OWNER

UNIT/ADDRESS

Lorraine Sowa
Signature
LORRAINE SOWA
Printed Name

UNIT 402
6701 MILWAUKEE AVE. - NILES, IL. 60714

PIN NO.

Signature

Printed Name

10-31-401-042-1022

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Elizabeth Link
Signature
ELIZABETH LINK
Printed Name

6701 N. Milwaukee, #403
Niles, IL 60714

PIN NO.

10-31-401-042-1023

Signature

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Alice M. Davis
Signature
ALICE M DAVIS
Printed Name

#404
6701 Milwaukee Av.
Itasca IL 60714

PIN NO.

10-31-401-042-1024

Signature

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: None
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: None
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Diane Olejnik

6701 N. Milwaukee Ave #407

Signature

DIANE OLEJNIK

Miles, IL 60714

Printed Name

PIN NO.

Signature

10-31-401-042-1027

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Ronald C. Simmons
Signature
Ronald C. Simmons
Printed Name

6701 N. Milwaukee #409
Niles, IL 60714

PIN NO.

~~do not leave~~
10-31-401-042-1029

Signature

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Property of Cook County Clerk's Office

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UNIT OWNER

UNIT/ADDRESS

Donna J. Lahl

6701 N. MILWAUKEE AVE. Unit #410

Signature

DONNA J. LAHL

NILES, IL. 60714

Printed Name

PIN NO.

Signature

10-31-401-0421030

Printed Name

Vol. 127

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Cecilia Rakowski
Signature
Cecilia Rakowski
Printed Name

67012 Milwaukee #501

Signature

Printed Name

PIN NO.

10 31 401 042 1031

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Alan B. McFadden
Signature
ALAN B. MCFADDEN
Printed Name

6701 N MILWAUKEE
WILES, ILL 60714 #502

Patricia L. McFadden
Signature
PATRICIA L. MCFADDEN
Printed Name

PIN NO.

10-31-401-042-1033

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Evelyn Fowler

6701 N. MILWAUKEE #503

Signature

EVELYN FOWLER

NILES, IL 60714

Printed Name

PIN NO.

Signature

10-31-401-042-1033

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Jin Tae Kim
Signature
JIN TAE KIM
Printed Name

6701 N. MILWAUKEE #504
NILES, IL 60714

PIN NO.

Bok IM Kim
Signature
BOK IM KIM
Printed Name

10-31-401-042-1034

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Attila Cseri
Signature
ATTILA CSERI
Printed Name

6701 MILWAUKEE AVE UNIT 507
NILES, IL 60714

PIN NO.

10-31-401-042-1037

Signature

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: CITIMORTGAGE, INC.
Street/P.O. Box: PO BOX 183040
City/State/Zip: COLUMBUS OH 43218-3040
Mortgage Number: 1119874113-1

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Theodore S. Nicholas 6701 N. MILWAUKEE, #508

Signature

NILES, IL 60714

Theodore S. Nicholas
Printed Name

PIN NO.

Signature

10-31-401-042-1038

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Jessie Hebda

6701 N MILWAUKEE AVE #509

Signature

Jessie Hebda

NILES, IL 60714

Printed Name

PIN NO.

Signature

10-31-401-042-1039

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Richard C. Maslo

6701 Milwaukee Ave # 607 Niles IL 60714

Signature

RICHARD C. MASLO

Printed Name

PIN NO.

16-31-401-042-1041

Signature

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Maria M. Galbarski
Signature

6701 N. MILWAUKEE AVE 602

MARIA M. GALBARSKI
Printed Name

NILES, IL 60714

PIN NO.

Signature

10-31-401-042-1042

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

None

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UNIT OWNER

UNIT/ADDRESS

Vincent P. Pace

6701 N. Milwaukee ave. UNIT 603

Signature

VINCENT P. PACE

Miles IL 60714

Printed Name

PIN NO.

Signature

10-31-401-042-1043

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Joseph Abel
Signature
JOSEPH ABEL

6701 N. Milwaukee Ave. #604
Niles, IL 60714

Printed Name

Valerie J. Abel
Signature
Valerie J. Abel
Printed Name

PIN NO.

10-31-401-042-1044

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name:
Street/P.O. Box:
City/State/Zip:
Mortgage Number:

N/A

Financial Institution Full Name:
Street/P.O. Box:
City/State/Zip:
Mortgage Number:

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UNIT OWNER

UNIT/ADDRESS

Marilyn A. Takahashi
Signature
MARILYN A. TAKAHASHI
Printed Name

6701 N. MILWAUKEE AVE. #605
NILES, IL. 60714-5424

PIN NO.

10-31-401-042-1045

Signature

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: WELLS FARGO HOME MORTGAGE
Street/P.O. Box: ATTN: CUSTOMER SERVICE CORRESPONDENCE
City/State/Zip: P.O BOX 10335
Mortgage Number: DES MOINES, IA. 50306-0335
0613223726

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Teodozja Musialowicz

#606

Signature

TEODOZJA MUSIALOWICZ

6701 N. Milwaukee, NILES, IL 60714

Printed Name

PIN NO.

Signature

10-31-401-042-1046

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

UNOFFICIAL COPY

SIGNATURE PAGE FOR FIRST AMENDMENT TO DECLARATION OF CONDOMINIUM OWNERSHIP FOR BUNKER HILL CLUB CONDOMINIUM ASSOCIATION TO RESTRICT LEASING AND PETS

The undersigned personally and as unit owners(s) by signing this document hereby approve, acknowledge, authorize, and accept the First Amendment to the Declaration of Condominium Ownership for Bunker Hill Club Condominiums Association and all of its contents to restrict the leasing of units, to prohibit pets, and to correct missing language regarding limited common elements, and authorize detachment of this signature page from the copy to which it is attached and to attach this signature page to the Amendment to be recorded.

UNIT OWNER

UNIT/ADDRESS

Michael Gorkos
Signature
MICHAEL GORKOS
Printed Name

6701 N. MILWAUKEE #608
NILES, IL 60714

PIN NO.

10-31-401-042-1048

Signature

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

Financial Institution Full Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Veronica M. Portschy
Signature
VERONICA M. PORTSCHY
Printed Name

6701 N. MILWAUKEE AVE.
NILES, IL 60714 #609

PIN NO.

Signature

~~#609~~

Printed Name

10-31-401-042-1049

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

copy

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UNIT OWNER

UNIT/ADDRESS

Edward Labedz
Signature
EDWARD LABEDZ
Printed Name

6701 N. MILWAUKEE #610
NILES, ILLINOIS 60714

Stephanie Labedz
Signature
STEPHANIE LABEDZ
Printed Name

PIN NO.

10-31-401-042-1050

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Mary C. Diskin
Signature

703

MARY C. DISKIN
Printed Name

6701 N. Milwaukee, NILES, IL 60714

PIN NO.

Signature

10-31-401-042-1053

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Kazimierz F. Gorczak
Signature
KAZIMIERZ F. GORCZAK
Printed Name

704
6701 N. MILWAUKEE AVE. NILES, IL. 60714

PIN NO.

Hermina Sasicki-Gorczyk
Signature
HERMINA SASICKI-GORCZAK
Printed Name

10-31-401-042-1054

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Carol J. Smith
Signature

6701 N. Milwaukee # 705

CAROL J. SMITH
Printed Name

Chicago, Ill. 60714

PIN NO. Cook County
Saf Bill
10-31-401-042-1055

JAMES D. SMITH
Signature
Printed Name

James D Smith
Signature

Printed Name

N/A

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Stanley Wiegos
Signature
STANLEY WIEGOS
Printed Name

6701 N. Milwaukee Ave # 708
Wiles, IL 60714

Loretta Wiegos
Signature
LORETTA WIEGOS
Printed Name

PIN NO.

10-31-401-042-1058

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Stanley Wiegos
Signature
STANLEY E. WIEGOS
Printed Name

6701 N. Milwaukee Ave # 709
Julia St. 60714

Loretta Wiegos
Signature
LORETTA WIEGOS
Printed Name

PIN NO.

10-31-401-042-1059

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

Financial Institution Full Name: _____
Street/P.O. Box: _____
City/State/Zip: _____
Mortgage Number: _____

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UNIT OWNER

UNIT/ADDRESS

Peter Kouzaros

6701 N. MILWAUKEE AVE.

Signature

PETER KOUZAROS

Nines 11 # 710

Printed Name

60714

PIN NO.

10.31.401-042-1060

Signature

Printed Name

Signature

Printed Name

MORTGAGE OR LIEN HOLDERS NAME AND ADDRESS: (please add another sheet listing any additional lien holders)

Financial Institution Full Name:

OWNER

Street/P.O. Box:

City/State/Zip:

Mortgage Number:

Financial Institution Full Name:

OWNER

Street/P.O. Box:

City/State/Zip:

Mortgage Number:

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AFFIDAVIT OF OFFICER

I certify that I am an Officer of the Bunker Hill Club Condominium Association and that, according to the books and records of said Association and as of the date hereof, the foregoing represents the signatures of Unit Owners being at least three-fourths (3/4) of the total Unit Owners in the Association. I further certify that a copy of this First Amendment has been mailed by certified mail to all mortgagees having bona fide liens of record against any unit, not less than ten (10) days prior to the date of this Affidavit.

IN WITNESS WHEREOF, I have sent my hand and seal as the Secretary of this Association on this 29th day of June, 2010.

Maria Alejandra
Secretary
Title

SUBSCRIBED AND SWORN to before me
this 29th day of June, 2010

Elsa M Blanco
NOTARY PUBLIC



Property of Cook County Clerk's Office

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EXHIBIT "A"

TO

FIRST AMENDMENT TO DECLARATION OF CONDOMINIUM
OWNERSHIP FOR BUNKER HILL CLUB CONDOMINIUM

LEGAL DESCRIPTION

Unit Numbers 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 701, 702, 703, 704, 705, 706, 707, 708, 709, and 710, in Bunker Hill Club Condominium, as delineated on a Plat of Survey of the following described tract of land

Parcel 1

That part of Lots 3, 5 and 6 in the subdivision of William Kolb's Farm, being Lots 3, 4, 9, 10, 11, 12, 17 and 18 of R.K. Swift's subdivision of Victoria Pothier's reserve and parts of Lots 2, 3 and 4 of the Assessor's Division of the Southeast 1/4 of Section 31, all in Township 41 north, Range 13 East of the Third Principal Meridian, described as follows:

Beginning at the intersection of the Southeasterly line of lot 5 and the Northeasterly line of Milwaukee Avenue proceed Northeasterly along said Southeasterly line of lot 5, 125.0 feet to a point; thence proceed Northwesterly along a line 125.0 feet Northeasterly of and parallel to the Northeasterly line of Milwaukee Avenue, 320.0 feet to a point designated by an iron pipe which is 8.07 feet Southwesterly of and on line with Cook County F.P.D. marker number 116; thence North 24 degrees 25 minutes East in a straight line forming an angle of 123 degrees 12 minutes with a line that is 125.0 feet Northeasterly of and parallel to said Northeasterly line of Milwaukee Avenue (turned from Southeast to Northeast), 746.47 feet to a point designated by Cook County F.P.D. marker number 117; thence North 15 degrees 04 minutes East, 203.44 feet to Cook County F.P.D. marker number 118; thence North 75 degrees 25 minutes West, 115.08 feet to Cook County F.P.D. marker number 119; thence South 42 degrees 57 minutes West, 147.90 feet to Cook County F.P.D. marker number 120; thence South 85 degrees 09 minutes West, 160.32 feet to Cook County F.P.D. marker number 121; thence North 71 degrees 02 minutes West, 124.26 feet to Cook County F.P.D. marker number 122; thence North 78 degrees 17 minutes West, 276.85 feet to Cook County F.P.D. marker number 123; thence proceed Southwesterly along a line that is 50.0 feet Southeasterly of and parallel to the Northwesterly line of said lot 6, 266.80 feet to the Northeasterly line of Milwaukee Avenue; thence proceed Southeasterly along said Northeasterly line of Milwaukee Avenue to the place of beginning, excepting from the above described tract all that part lying Southeasterly of a line 250.0 feet Southeasterly of and parallel with the Northwesterly line of said lot 6, in Cook County, Illinois.

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Parcel 2:

That part of lot 6 in the subdivision of William Kolb's Farm being lots 3, 4, 9, 10, 11, 12, 17 and 18 of R.K. Swift's Subdivision of Victoria Pothier's Reserve, and parts of lots 2, 3 and 4 of the assessor's division of the Southeast 1/4 of Section 31, all in Township 41 North, Range 13, East of the third principal meridian described as follows: beginning at the intersection of the Northwesterly line of lot 6 with the East line of Milwaukee Avenue; thence Southeasterly along said street 50 feet; thence Northeasterly parallel with the Northwesterly line of said lot, 250 feet; thence Northwesterly parallel with Milwaukee Avenue, 50 feet to the Northwesterly line of said lot 6; thence Southwesterly along said line, 250 feet to the place of beginning, (excepting from the above described tract the Southwesterly 100 feet thereof as measured on the Northwesterly and Southeasterly lines of said tract) in Cook County, Illinois,

which Plat of Survey is attached as Exhibit "A" to the Declaration of Condominium made by Parkway Bank and Trust Company, as Trustee Under Trust Agreement Dated May 26, 1992 and Known as Trust No. 10332, recorded September 21, 1993, as Document No. 93756546, together with each unit's percentage interest in the common elements, in Cook County, Illinois.

Address: 6702 N. Milwaukee Avenue, Niles, Illinois 60714

P.I.N.s: 10-31-401-042-1001 thru and including 10-31-401-042-1060

Prepared by &
MAIL TO:

Dickler, Kahn, Slowikowski & Zavell, Ltd.
85 W. Algonquin Road, Suite 420
Arlington Heights, IL 60005