## **UNOFFICIAL COPY**

					·	1025	634 <i>2</i> 64		
JCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY					İ	Doc#: 1025634064 Fee: \$38.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 09/13/2010 11:00 AM Pg: 1 of 1			
A. N.	AME & PHONE OF CON	TACT AT FILER (option Phone (80	<sup>nal]</sup> 00) 331-3282    Fax (	818) 662-4141		Date: 09/13/20	)10 11:00 AM F9	, , 01 1	
B. S	END ACKNOWLEDGEM	ENT TO: (Name and I	Mailing Address) 15715 BA	NK FINANCIAL					
CT Lien Solutions 2513396				3966					
	P.O. Box 29 Glendale, C.	071 A 91209-9071	ILIL	ı					
		6			THE	E ABOVE SPACE IS	FOR FILING OFFICE U	SE ONLY	
1a. I	NITIAL FINANCING 0623517044	STATEMEN', FILE 08/23/06	CC IL Cook+		·	to be	FINANCING STATEMEI of filed [for record] (or record) LESTATE RECORDS.	IT AMENDMENT is orded) in the	
2. [	X TERMINATION:	Effectiveness of the	Fine icin , Statement identified	above is terminated wi	th respect to security intere	st(s) of the Secured	Party authorizing this Te	rmination Statement.	
3.	CONTINUATION continued for the ad-	ditional period provided						Statement is	
4.			name of assignee in item 7a		of assignee in 7c; and cured Party of record. Chec	also give name o	of assignor in item 9.		
6. C	Also check one of the	e following three boy for address: Give curre ge) in item 7a or 7b and INFORMATION:	This Amendment af lects  tes <u>and</u> provide appropriate  nt record name in item 6a or ch  for new address (if address che	information in item	s 6 and/or 7.  DELETE name: Give red to be deleted in item 6a		ADD name: Complete iter tem 7c; also complete ite		
OR	6b. INDIVIDUAL'S LAST NAME			FIRST NAME	//	MIDDLE NAME SUFFIX			
	YINGJIE			SUN	40				
7. C	HANGED (NEW) OF		ATION:			· <del></del> -		<u> </u>	
	7a. ORGANIZATION'S	NAME							
OR	7b. INDIVIDUAL'S LAS	T NAME		FIRST NAME		MIDDLE	IAME	SUFFIX	
7¢. I	MAILING ADDRESS	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	CITY		STATE	POSTAL CODE	COUNTRY	
7d.	SEE INSTRUCTION	ADD'L INFO RE ORGANIZATION	7e. TYPE OF ORGANIZATIO	N 7f. JURISDICT	ION OF ORGANIZATION	7g. CRGA	ANISATIONAL ID#, if any	·····3	
P	Describe collateral Parcel # 20-11-42	DEBTOR  ATERAL CHANGE deleted or adde 24-008. Legal N THE FAST 1/2	check only one box. d, or give entire restated of the country of the country. COOK COUNTY, II	ND 15 IN OWN	FRS DIVISION OF	LOTS 6 TO	13 INCLUSIVE I RANGE 14, EAS	N BLOCK 42 ST OF THE	

			S
NAME OF SECURED PARTY OF RECORD AUTHORIZINg adds collateral or adds the authorizing Debtor, or if this is a Term 9a. ORGANIZATION'S NAME	IG THIS AMENDMENT (name of assignor, if this nation authorized by a Debtor, check here and el	is an Assignment). If this is an Amendment authonized name of DEBTOR authorizing this Amendme	orized by a Debtor which ont.
BANKFINANCIAL, F.S.B.	FIRST NAME	IMIDDLE NAME	I SUFFIX
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	WIDDLE WAIL	5
OPTIONAL FILER REFERENCE DATA 5133966 Debtor Name: Yingjie, S	Sun ks 1832100		E

Prepared by CT Lien Solutions, P.O. Box 290 Glendals, CA 91209-9071 Tel (800) 331-328 INT