## **UNOFFICIAL COPY**

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]	NT	Eugen	1030634041 : 1030634041 Fee: e "Gene" Moore RHSP Fe County Recorder of Deeds	e:\$10.00
Phone (800) 331-3282 Fax (818	8) 662-4141		11/02/2010 10:27 AM Pg:	
B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 8839 BCM  CT Lien Solutions 258578  P.O. Box 29071  Glendale, CA 91209-9071  FIXTUR			e e e e e e e e e e e e e e e e e e e	
		THE ABOV	E SPACE IS FOR FILING OFFICE U	SE ONLY
1a. INITIAL FINANCING STATEMENT FILE # 0608333145 03/24/05 CC IL Cook+			1b. This FINANCING STATEMENT to be filed [for record] (or record REAL ESTATE RECORDS.	
2. TERMINATION: Effectiveness of the Financiary Statement identified above continued for the additional period provided by applicable i.u.v.				
4. ASSIGNMENT (full or partial): Give name of assign se in item 7a or 7  5. AMENDMENT (PARTY INFORMATION): This Amendment a fects Debter Also check one of the following three boxes and provide appropriate information CHANGE name and/or address: Give current record name in item 6a o. 5b: also name (if name change) in item 7a or 7b and/or new address (if address change)  6. CURRENT RECORD INFORMATION:  6a ORGANIZATION'S NAME  AMALGAMATED BANK OF CHICAGO, A	otor or Secu ormation in items give new nitom 7c.	red Party of record. Check only on 6 and/or 7. DELETE name: Give record name to be deleted in item 6a or 6b.	ne ADD name: Complete item 7c; also complete item	ns 7d-7g (if applicable)
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	e distriction	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  OR				
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	0,	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS	CITY	4	STATE POSTAL CODE	COUNTRY
7d. SEE INSTRUCTION   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   ORGANIZATION   DEBTOR	7f. JURISDICTIO	N OF ORGANIZATION	7g. URGANIIATIONAL ID #, if any	NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collate  SEE ATTACHED. PROPERTY ADDRESS: 3138-3150 A 17312060130000, 17312060140000, 17312060150000, 17312060210000.	ASHLAND AV	describe collateral assigne /E, CHICAGO, IL. TA 0000, 173120601700	X PARCEL #: 1731206	0120000, 
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMEND adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by 9a. ORGANIZATION'S NAME			If this is an Amendment authorized b DR authorizing this Amendment.	y a Debtor which
OR SUN LIFE ASSURANCE COMPANY OF ( 9b. INDIVIDUAL'S LAST NAME	CANADA FIRST NAME		MIDDLE NAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA 25857807 Debtor Name: AMALGAMATED E AGREEMENT DATED APRIL 21, 1988 AND				8 P.O. Box 29071

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	UC FOL	C FINANCIN LOW INSTRUC	IG STATEME	NT AMEND d back) CAREFULL	MENT AD	DENDUM	
•	11. I	NITIAL FINANCIN	G STATEMENT FI	LE # (same as item 1a	on Amendment for	m)	
<b>a</b> (	06	08333145	03/24/06	CC IL Cook	+		
*	12. N	AME of PARTY AUT	HORIZING THIS AME	NDMENT (same as item	9 on Amendment form	n)	
:4 :•		SUN LIFE ASSURANCE COMPANY OF CANADA					
' (	OR	12b. INDIVIDUAL'S I	LAST NAME	FIRST NAME		MIDDLE NAME, SUFFIX	
7	13. (	Use this space for	r additional inform	nation			

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

**FULL TEXT OF ITEM 6:** AMALGAMATED BANK OF CHICAGO, AS TRUSTEE UNDER A TRUST AGREEMENT DATED APRIL 21, 1988 AND KNOWN AS TRUST NO.5361

500c Colling Clark's Office 17312060120000,17312060130000,17312060140000,17312060150000,17312060160000,17312060170000,17312060180000,173120602100

18 XX 5 1 10 1

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## LEGAL DESCRIPTION:

5 SION

6

LOTS 10, 11, 12 AND 13 IN STINSON'S SUBDIVISION OF BLOCKS 1, 2 AND 10 IN CANAL TRUSTEES' SUBDIVISION OF THE EAST 1/2 OF SECTION 31, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, (EXCEPT THAT PART THEREOF LYING EAST OF A LINE 67 FEET WEST OF AND PARALLEL WITH THE EAST LINE OF SAID SECTION, HERETOFORE TAKEN BY THE CITY OF CHICAGO FOR STREETS) IN COOK COUNTY, ILLINOIS.

Property of County Clark's Office