<u>UN</u>OFFICIAL COP Doc#: 1033534083 Fee: \$38.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds **UCC FINANCING STATEMENT AMENDMENT** Date: 12/01/2010 01:59 PM Pg: 1 of \$ FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) American General Finance 11844 S Western Chicago IL 60643 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY a. INITIAL FINANCING STA This FINANCING STATEMENT AMENDMENT is 0919719019 to be filed [for record] (or recorded) in the TERMINATION: Effectiveness of the Transing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. CONTINUATION: Effectiveness of the Fir ancing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided y applicable law ASSIGNMENT (full or partial): Give name of as igne in from 7a or 7b and address of assignee in item 7c, and also give name of assignor in item 9. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate inform CHANGE name and/or address: Give current record name in ite.,, 6, or 6b, also give new name (if name change) in item 7a or 7b and/or new address (if add ess / nange) in item 7c ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable DELETE name: Give record name 6. CURRENT RECORD INFORMATION: 6a, ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S LAST NAME RST NAME MIDDLE NAME SUFFIX Williams Gardner Rot in 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME 7c. MAILING ADDRESS CiTY STATE POSTAL CODE COUNTRY 7d. TAX ID #: SSN OR EIN 7f. JURISDICTION OF ORGANIZATION ORGANIZATIONAL ID #, if any ADD'L INFO RE | 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR NONE 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned. ABBREVIATED DESCRIPTION: LOT: 137 DIST: 13 CITY: BREMEN SEC/TWN/RNG/MER: SEC 33 TWN 36N RNG 13E MAP REF: 28-33-NE (A&B) CITY/MUNI/TWP: BREMEN PERM TAX NO: 28-33-212-025

PROPERTY ADDRESS: 17930 SOUTH LAVERGNE AVE, COUNTRY CLUB HILLS, IL 60478

9a. ORGANIZATION'S NAME	Termination authorized by a Debtor, check here and ente		·
American General Finance			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

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