| JCC | FINANCING | STATEMENT | AMENDMENT |
|-----|------------------|------------------|------------------|

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
Phone (800) 331-3282 Fax (818) 662-4141

B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 15795 BAYVIEW SERVIC

CT Lien Solutions 26731172

P.O. Box 29071
Glendale, CA 91209-9071

FIXTURE

Doc#: 1101934006 Fee: \$40.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 01/19/2011 08:31 AM Pg: 1 of 3

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| a. INITIAL FINANCING STATEMEN) FILE# 0801617038 01/16/08 CC IL Cook+ | | 1b. This FINANCING STATEMENT AN to be filed [for record] (or recorded) REAL ESTATE RECORDS. | |
|--|--|---|---------|
| X TERMINATION: Effectiveness of the Innancing Statement identified above | | | |
| CONTINUATION: Effectiveness of the rina cing Statement identified above continued for the additional period provided by applicable law. | | | ment is |
| ASSIGNMENT (full or partial). Give name of assigned in item 7a or 7b | | | |
| AMENDIALIA (I AICT III OTAMATICIA). TIIS TIIICICATICA | btor or Secured Party of record. Check only or | ne of these two boxes. | |
| Also check one of the following three boxes and provide ap ropric te info CHANGE name and/or address: Give current record name in iten. 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address | give new DELETE name: Give record hair | ADD name: Complete item 7a c item 7c; also complete items 7c | |
| . CURRENT RECORD INFORMATION: |) | <u> </u> | |
| 6a, ORGANIZATION'S NAME | τ | | |
| _ | ' () | | |
| 6b. INDIVIDUAL'S LAST NAME | FIR. T NAME | MIDDLE NAME | SUFFIX |
| CASTANEDA | JOSE | L | |
| , CHANGED (NEW) OR ADDED INFORMATION: | | | |
| 7a. ORGANIZATION'S NAME | 9 | | |
| 7b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX |
| c. MAILING ADDRESS | CITY | STATE POSTAL CODE | COUNTRY |
| d. <u>SEE INSTRUCTION</u> ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR | 71. JURISDICTION OF ORGANIZATION | 7c ORGANIZATIONAL ID #, if any | NONE |
| . AMENDMENT (COLLATERAL CHANGE): check only one_ box. | | Ux | |
| Describe collateral deleted or added, or give entire restated collateral | eral description, or describe collateral assigne | ed. | |
| Parcel ID: 30-18-219-033 | | nd. | |
| | | C | |

| 9. N | AME OF SECURED PARTY OF RECORD AUTHOR adds collateral or adds the authorizing Debtor, or if this is a T | ZING THIS AMENDMENT (name of assignor, if this is ermination authorized by a Debtor, check here and en | ter name of DEBTOR authorizing this Amendme | nt. | |
|------|---|--|---|--------|--|
| OR | 99. ORGANIZATION'S NAME BAYVIEW LOAN SERVICING, LLC | | | | |
| | 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX | |

10. OPTIONAL FILER REFERENCE DATA

26731172 Debtor Name: CASTANEDA, JOSE L. 200061447 67325

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| UC FOL | C FINANCIN LOW INSTRUC | G STATEME TIONS (front and | NT AMENDMEN back) CAREFULLY | IT ADDENDUM | | |
|-----------|---------------------------|---|---|-------------------|--|--|
| | | | E # (same as item 1a on Amen CC IL Cook+ | | | |
| 12. N | AME of PARTY AUT | HORIZING THIS AME | ENDMENT (same as item 9 on Ame | endment form) | | |
| | BAYVIEW | ORGANIZATION'S NAME AYVIEW LOAN SERVICING, LLC | | | | |
| OR | 12b. INDIVIDUAL'S L | _AST NAME | FIRST NAME | MIDDLE NAME,SUFFD | | |
| | <u> </u> | additional inform | -tion | | | |

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Description: see attached

PARCEL IL

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EXHIBIT "A"

LOTS 4, 5, 6, 7, 8 AND 9 IN BLOCK 10 IN PHILLIP'S SUBDIVISION OF THE NORTHEAST 1/4 OF THE NORTHEAST 1/4 OF SECTION 18, TOWNSHIP 36 NORTH, RANGE 15 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Permanent Real Estate Tax No.: 30-18-219-033; 30-18-219-034; 30-18-219-037; 30-18-219-038, and 30-18-219-060.

Adress: 7Cook Colling Clark's Office Property Address: 742 Burnham Avenue, Calumet City, IL