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			1114534 <i>0</i> 5 <i>ø</i>						
FO	CC FINANCING STATEMENT AMENDMEN LLOW INSTRUCTIONS (front and back) CAREFULLY AME & PHONE OF CONTACT AT FILER [optional]	NT	Doc#: 1114534050 Fee: \$38.00 Eugene "Gene" Moore RHSP Fee: \$10.00						
	· · · · · · · · · · · · · · · · · · ·) 662-4141	Cook County Recorder of Deeds Date: 05/25/2011 11:28 AM Pg: 1 of 2						
В. 9	SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 10656 PRIME	ACCEPTAN							
	CT Lien Solutions 284166	19							
1	P.O. Box 29071								
١.	Glendale, CA 91209-9071	į							
	FIXTUR	E							
			THE ABOVI	E SPACE IS	FOR FILING OFFICE USE	ONLY			
	INITIAL FINANCING STATEMENT FILE# 0632015055 11/16/00 CC IL Cook+ .	-		1b. This I X to be REAL	FINANCING STATEMENT / filed [for record] (or recorde _ ESTATE RECORDS.	MENDMENT is d) in the			
2. X TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. 3. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable low.									
4.	ASSIGNMENT (full or partial): Give name of assign e in item 7a or 7	b and address of a	ssignee in 7c; and also giv	e name of	assignor in item 9.				
	MENDMENT (PARTY INFORMATION): This Amendment of ects Debt	tor or Secured	Party of record. Check only or						
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 6a or 6b: Jiso give new name (if name change) in item 7a or 7b and/or new address (if address charge) in item 7c. DELETE name: Give record name ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable)									
6. C	URRENT RECORD INFORMATION: 5a. ORGANIZATION'S NAME								
	G. GAGARIZATION O MAINE	(,							
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NA. 1E		MIDDLE NA	ME	SUFFIX			
	NUNEZ	MARIA	<u></u>	E					
7. CHANGED (NEW) OR ADDED INFORMATION: [7a. ORGANIZATION'S NAME									
	AL OLONGE HOLO HANGE								
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	0	MIDDLE NA	ME	SUFFIX			
7c. 1	MAILING ADDRESS	CITY	1	STATE	POSTAL CODE	COUNTRY			
7d. \$	SEE INSTRUCTION ADD'L INFO RE 76. TYPE OF ORGANIZATION	7f. JURISDICTION C	F ORGANIZATION	7 _L . JRGAN	117ATIONAL ID#, if any				
_	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.									
					S d	<u> </u>			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.									
	98. ORGANIZATION'S NAME PRIME ACCEPTANCE CORP.								
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NA	ME	SUFFIX			

610062120

10. OPTIONAL FILER REFERENCE DATA 28416619 Debtor Name: NUNEZ, MARIA E

FILING OFFICE COPY - NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)

Prepared by CT Lien Solutions, P.O. Box 29071 Glendale, CA 91209-9071 Tel (800) 331-3282

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			NT AMENDMEN back) CAREFULLY	IT ADDENDUM			
11.	INITIAL FINANCING	STATEMENT FIL	E # (same as item 1a on Ame	ndment form)			
06	32015055	11/16/06	CC IL Cook+				
12. NAME of PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a ORGANIZATION'S NAME ** PRIME ACCEPTANCE CORP.							
QR	12b. INDIVIDUAL'S L	AST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
13.	Use this space for	additional inform	nation	<u> </u>			

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36 T4.
al ID: 06. Description: NORTH100 AC SEC36 NE4 S36 T41N R09E 3P LEGAL LOT: 17 LEGAL BLOCK: 2 APN: 06-36-213-017-0000 SUBDIVISION: HANOVER PARK. Faicel ID: 06-36-213-017-0000