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UCC.	FINANCING	STATEMENT	AMENDMENT
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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) 10011 10011-BANK OF 28415313 CT Lien Solutions

Doc#: 1114534052 Fee: \$40.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds

Date: 05/25/2011 11:28 AM Pg: 1 of 3

	P.O. Box 29071					
	Glendale, CA 91209-9071	iLIL				·
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		1 17(101	,_			
				THE ABOV	E SPACE IS FOR FILING	OFFICE USE ONLY
	0402847316 01/25/04	* CC IL Cook+			1b. This FINANCING to be filed [for reco	STATEMENT AMENDMENT is ord] (or recorded) in the ECORDS.
	X TERMINATION: Effectiveness of no	F nancing Statement identified above	e is terminated with respe	ct to security interest(s) of	he Secured Party authoriz	zing this Termination Statement
	CONTINUATION: Effectiveness of the continued for the additional period provided	e Finan ing Statement identified abov				
_	ASSIGNMENT (full or partial): Give n	name of assignee in item 7a or 7	b and address of assign	nee in 7c; and also give	name of assignor in ite	em 9.
À	AMENDMENT (PARTY INFORMATION):			rty of record. Check only o		
	Also check one of the following three box CHANGE name and/or address: Give curre name (if name change) in item 7a or 7b an	ent record name in iten 6a or 6b; also	ogive new 🖂 DELE	or 7. TE name: Give record nar deleted in item 6a or 6b.		omplete item 7a or 7b. and also omplete items 7d-7g (if applicab
C	URRENT RECORD INFORMATION:)			
	63 ORGANIZATION'S NAME THE REAL REEL COR	PORATION	T			
R			Tero Eval)	
	6b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME	SUFFIX
			<i>U</i> ₁			
. C	CHANGED (NEW) OR ADDED INFORMA	ITION:	9/) .		
R	7a. ORGANIZATION'S NAME			7		
K ;	7b. INDIVIDUAL'S LAST NAME		FIRST NAME	C	MIDDLE NAME	SUFFIX
:. N	MAILING ADDRESS		СІТУ	C/	STATE POSTAL CO	DDE COUNTRY
d. §	SEE INSTRUCTION ADD'L INFO RE ORGANIZATION	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF (PRGANIZATION	7g ORGANIZATIONAL I	ID #, if any
_	DEBTOR				9	NONE
	MENDMENT (COLLATERAL CHANGE)		eral description, or descr	ibe collateral assigne	d.	
	MENDMENT (COLLATERAL CHANGE)		eral description, or descr	ibe collateral assigne	d. Office	
	MENDMENT (COLLATERAL CHANGE)		eral description, or descr	ibe collateral assigne	d.	

NG THIS AMENDMENT (name of assignor, if this is	an Assignment). If this is an Amendment author	ized by a Dobtor which			
ination authorized by a Debtor, check here and en	ter name of DEBTOR authorizing this Amendme	nt.			
9a ORGANIZATION'S NAME BANK OF AMERICA, N.A.					
FIRST NAME	MIDDLE NAME	SUFFIX			
	ination authorized by a Debtor, check here and en	NG THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment author ination authorized by a Debtor, check here and entername of DEBTOR authorizing this Amendment authorized by a Debtor, check here and entername of DEBTOR authorizing this Amendment authorized by a Debtor, check here and entername of DEBTOR authorizing this Amendment authorized by a Debtor, check here and entername of DEBTOR authorizing this Amendment authorized by a Debtor, check here are an enternament authorized by a Debtor, check here are an enternament authorized by a Debtor, check here are an enternament authorized by a Debtor, check here are an enternament authorized by a Debtor, check here are an enternament authorized by a Debtor, check here are an enternament authorized by a Debtor, check here are an enternament authorized by a Debtor, check here are an enternament authorized by a Debtor, check here are an enternament authorized by a Debtor, check here are an enternament authorized by a Debtor, check here are an enternament authorized by a Debtor, check here are an enternament authorized by a Debtor, check here are an enternament and an enternament authorized by a Debtor and a Debtor and a Debtor are are an enternament and a Debtor are are a Debtor and a Debtor and a Debtor and a Debtor are are a Debtor and a Debtor and a Debtor are are a Debtor and a Debtor and a Debtor are are a Debtor and a Debtor and a Debtor are a Debtor and a Debtor and a Debtor are a Debtor and a Debtor and a Debtor are a Debtor and a Debtor and a Debtor are a Debtor and a Debtor and a Debtor are a Debtor and a Debtor and a Debtor and a Debtor and a Debtor are a Debtor and a Debt			

10. OPTIONAL FILER REFERENCE DATA

28415313 Debtor Name: THE REAL REEL CORPORATION

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			NT AMENDMEN H back) CAREFULLY	T ADDENDUM	
11.	INITIAL FINANCING	G STATEMENT FIL	E # (same as item 1a on Ameno	lment form)	
04	02847316	01/28/04	CC IL Cook+		
12. 1	NAME of PARTY AUT	HORIZING THIS AME	NDMENT (same as item 9 on Amer	ndment form)	
1	BANK OF AMERICA, N.A.				
OR	12b. INDIVIDUAL'S I	_AST NAME	FIRST NAME	MIDDLE NAME, SUFFIX	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Description: LOCATION: 14700/9-RVARD COLTON, ILLINOIS RECORD OWNER: DOLTON INDUSTRIES, INC. SEE EXHIBIT B FAXED. Parcel ID: 29-09-108-201

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EXIIIBIT B

Debtor:

RRC-Honeycomb Acquisition, LLC

Secured Party: Fleet National Bank

PARCEL I:

ALL OF BLOCK 2 IN NEW CHICAGO IN THE NORTHWEST 1/4 OF SECTION 9. TOWNSHIP 36 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

TAX ID NUMBERS: 29-09-106-001, 29-09-106-002, 29-09-106-003.

PARCEL 2:

BLOCK 3 (EXCEPT THAT PART IF ANY WHICH MAY BE COVERED BY THE WATERS OF THE LITTLE CALUMET RIVER) IN NEW CHICAGO IN THE NORTHWEST 1/2 OF SECTION 9, TOWNSHIP 36 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY ILLINOIS.

TAX ID NUMBERS: 29-09-106-004, 29-09-106-005. -OUNTY CLOTH

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