UNOFFICIAL COPY

LIGO SINANGING STATEMENT AMENDMENT	r	Doc#: 1206222004 Fee: \$40.00	
UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY	l		
A. NAME & PHONE OF CONTACT AT FILER [optional]		Eugene "Gene" Moore of E Cook County Recorder of E	eeds
ARLENE BARRACO 773-445-7755		Cook County Recorder of E Date: 03/02/2012 08:30 AN	1 Pg: 1 of 1
B. SEND ACKNOWLEDGMENT TO: (Name and Address)		Date: our-	
SPRINGLEAF FINANCIAL SERVICES			
2313 W. 95TH STREET			
CHICAGO, IL 60643			÷
	ŀ		
	ı		
	THE ABO	VE SPACE IS FOR FILING OFFICE	IISE ONI V
1a. INITIAL FINANCING STATEMENT F.LF 4	THE ADO	1b. This FINANCING STATEM	IENT AMENDMENT is
0923334025		to be filed [for record] (or record) REAL ESTATE RECORDS	ecorded) in the 3.
2. TERMINATION: Effectiveness of the Fine and Statement identified above is	terminated with respect to security interest(s) of the Secured Party authorizing this Term	nination Statement.
3. CONTINUATION: Effectiveness of the Fir anding Statement identified above	e with respect to security interest(s) of the	Secured Party authorizing this Continuation	n Statement is
continued for the additional period provided by replicable law.			
4. ASSIGNMENT (full or partial): Give name of assign ee in iter. 7a or 7b and ac		#*************************************	
· · · · · · · · · · · · · · · · · · ·	tor or Secured Party of record. Check	k only one of these two boxes.	
Also check one of the following three boxes and provide appropriate information in ite		ord name ADD name: Complete ite	m 7a or 7b, and also
CHANGE name and/or address: Give current record name in item so o ob also name (if name change) in item 7a or 7b and/or new address (if address chrige)	in item 7c. to be deleted in item 6a o	r 6b. Litem 7c; also complete ite	ms 7d-7g (if applicable).
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	4		
OR 6b. INDIVIDUAL'S LAST NAME	FIR. TNAME	MIDDLE NAME	SUFFIX
MITCHELL	LATONYA		
7. CHANGED (NEW) OR ADDED INFORMATION:	96	****	
7a. ORGANIZATION'S NAME	7/x,		
OR	TELDOT MANE	MIDDLE NAME	SUFFIX
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	WILDDEE IAVIAE	33177
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
8152 S. PRINCETON	CHICAGO	IL 60620	USA
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	1/g. ORGANIZATIONAL ID #, if	
20-33-217-036 ORGANIZATION DEBTOR		10	NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateral deleted or added, or give entire restated collatera	description, or describe collateral as	ssigned.	
DIST 72 CITY LAKE SEC/TWN/RNG/MER			-33-NE
(A&B) CITY/MUNI/TWP LAKE	(020 00 11111 0011 11		•••
(AQD) CITT/MON/TWE LAKE		(0)	
DIN#20 22 247 026			
PIN#20-33-217-036			
1000000 0450 0 00W05TON AVE O	HICACO II GOGOO		
ADDRESS 8152 S. PRINCETON AVE, CI	HICAGO, IL 60020		
			2° A
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME	ENDMENT (name of assignor, if this is an /	Assignment). If this is an Amendment author	rized 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	a of DEBTOR authorizing this Amendmen	L
9a. ORGANIZATION'S NAME		21110400 11 00040	
SPRINGLEAF FINANCIAL SERVICES 23		CHICAGO, IL 60643	
OR 95. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	
10, OPTIONAL FILER REFERENCE DATA			