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-						
JCC FINANCI		MENT AMENDME Dack) CAREFULLY	NT	Doc#: 1210719017	' Fee: \$40.00	
A. NAME & PHONE OF CO	NTACT AT FILER [option	onal]	3) 662-4141	Doc#: 1210719017 Fee: \$42.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 04/16/2012 08:51 AM Pg: 1 of 3		
B. SEND ACKNOWLEDGE	WENT TO: (Name and	Mailing Address) 15795 BAYVI	EW SERVIC	12.72 00.57 A	M Pg: 1 of 3	
CT Lien Sol	CT Lien Solutions 32796421					
P.O. Box 29	9071	0.0		the second of the second		
Glendale, CA 91209-9071			,_			
		FIXTUR				
			1	THE ABOVE SPACE IS FOR FILING OFFICE [1b. This FINANCING STATE]		
a. INITIAL FINANCING 0713015068	3 05/15/07	CC IL Cook+		to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.		
2. TERMINATION:				nterest(s) of the Secured Party authorizing this of the Secured Party authorizing this Continual		
3. X CONTINUATION continued for the ad	 Effectiveness of the iditional period provided 		with respect to the security interest(s)	of the Secured Party authorizing this Continua	(IOI) Statement is	
. ASSIGNMENT (ull or partial): Give r	name of ass.gove in item 7a or 7b	and address of assignee in 7c; an	d also give name of assignor in item 9.		
	,	This Amendment affr us Det	- <u>-</u> -	Check only one of these two boxes.		
CHANGE name and	d/or address: Give cum	res a <u>nd provide app opriate informent record name in item balo ob, also</u>	ogive newDELETE name: Giv		item 7a or 7b, and also	
		nd/or new address (if address ch.,nga)	in item 7c to be deleted in item	n 6a or 6b.	items 7d-7g (if applicable	
6a. ORGANIZATION'S			TO			
R 66. INDIVIDUAL'S LAS	T NAME		FIRS) NA'AE	MIDDLE NAME	SUFFIX	
JOHNSON			PATRICK			
7. CHANGED (NEW) OF		ATION:	77			
OR						
7b. INDIVIDUAL'S LAST NAME			FIRST NAME	MIDDLE NAME	SUFFIX	
/c. MAILING ADDRESS			CITY	STATE POSTAL CODE	COUNTRY	
				7/		
7d. <u>SEE INSTRUCTION</u>	ADD'L INFO RE ORGANIZATION	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	ON 7, (RGANIZATIONAL ID #, if		
AMENDMENT (COLL	DEBTOR): check only one_box.			NONE	
Describe collateral	$\overline{}$	· 	eral description, or describe collatera	assigned.	27	
		Ш			P 3	
				Q	S	
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					SC y	
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					IN 194	
				Assignment). If this is an Amendment authorize		
9a. ORGANIZATION'S	NAME	or if this is a Termination authorized by CVICING, LLC	by a Debtor, check here and enter n	ame of DEBTOR authorizing this Amendment	•	
DATVIEVV 9b. INDIVIDUAL'S LAS		14101140, LLO	FIRST NAME	MIDDLE NAME	SUFFIX	
				1	!	

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			NT AMENDMEN	T ADDENDUM			
FO	LLOW INSTRUC	TIONS (front and	d back) CAREFULLY				
11.	NITIAL FINANCIN	G STATEMENT FIL	E # (same as item 1a on Amen	dment form)			
07	13015068	05/10/07	CC IL Cook+				
12. 1	IAME of PARTY AUT	HORIZING THIS AME	NDMENT (same as item 9 on Ame	ndment form)			
	BAYVIEW LOAN SERVICING, LLC						
OR	12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME, SUFFIX			
		1.1142	-41				

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

arcel ID: 1. __ Description: SEE ATTACHED. Parcel ID: 17-32-408-010-0000

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Exhibit A

LEGAL DESCRIPTION:

LOT 17 IN BLOCK 9 IN GAGE AND OTHER'S SUBDIVISION OF THE EAST 1/2 OF THE SOUTHEAST 1/4 OF SECTION 32, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. 1. AD10-006 OPECOOP COUNTY CIENTS OFFICE

17-32-408-010-0000