J.No

UNOFFICIAL COPY

Doc#: 1215341057 Fee: \$46.00 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds
Date: 06/01/2012 03:03 PM Pg: 1 of 5

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER (optional) B. SEND ACKNOWLEDGMENT TO: (Name and Address) Cadwalader, Wickersham & Taft LLP 227 West Trade Street, Suite 2400 Charlotte, North Carolina 28202 Attention: Matthew Robertson, Esq. THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is 1a. INITIAL FINANCING STATEMENT FAL Decument #0721822037 filed 8/6/2007 to be filed [for record) (or recorded) in the REAL ESTATE RECORDS 2. TERMINATION: Effectiveness of the Financi a Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is nued for the additional period provided by applicab's lay. 4. X ASSIGNMENT (full or partial): Give name of assignee in Yum 7a or 7b and address of assignee in item 7c; and also give name of assignor in Item 9. 5. AMENDMENT (PARTY INFORMATION): This Amendment aff cts Debtor of Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information an items 6 and/or 7. CHANGE name and/or address: Give current record name in item 6s or the record name (if name change) in Item 7s or 7b and/or new address (if address change) in Item 7s or 7b and 1s or 7b and 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME BRE/LQ PROPERTIES L.L.C. OR 66. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX FIRST NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME Wells Fargo Bank, N.A., as Trustee for the Registered Certificateholders of Aer ill Lynch Floating Trust Commercial Mortgage Pass Through Certificates, Series 2008-LAQ OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME COUNTRY ČITY POSTAL CODE 7c. MAILING ADDRESS NC 28255 USA Charlotte c/o Bank of America, N.A., as servicer, Hearst Tower, 214 North Tryon Street 7d. TAX ID #: SSN OR EIN | ADD'L INFO RE | 7e. TYPE OF ORGANIZATION | ORGANIZATION g. OF GANIZATIONAL ID #, if any 7f. JURISDICTION OF ORGANIZATION NONE DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

9. (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.									
	MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.									
	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX						
10.	OPTIONAL FILER REFERENCE DATA File with Cook County, Illinois	(Inn 1017 - 5210 Southwick	Drive, Matteson, IL)							

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)
NATUCC3 4/23/01 C T System Online

1215341057 Page: 2 of 5

UNOFFICIAL COPY

	C FINANCING STATE		NT ADDENDUM	
	LOW INSTRUCTIONS (front and bac INITIAL FINANCING STATEMENT FI		lment form)	1
	Document #07218220	37 filed 8/6/2007		
12.	NAME OF PARTY AUTHORIZING T	HIS AMENDMENT (same as ite	im 9 on Amendment form)	1
•	12a. ORGANIZATION'S NAME	· · · · · · · · · · · · · · · · · · ·		1
OR	MORTGAGE ELECTRONIC	C REGISTRATION SY	STEMS, INC.	
UK	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX	
13.	Use this space for additional information	ion		1
				THE ABOVE SPACE IS FOR FILING OFFICE U
		9.		
		~/x		THE ABOVE SPACE IS FOR FILING OFFICE U
		Ux		
		′ ()		
			O _Z	
			τ_{\circ}	
			4/)	.
				7
			Ù	
				4
				0,0
				0
				() _~
				/)<
				1/0
				Co
				C

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1215341057 Page: 3 of 5

UNOFFICIAL COPY

	C FINANCING S		T AMENDMENT ADD	ITIONAL PARTY	1			
14, INITIAL FINANCING STATEMENT FILE # (same as item 1s on Amendment form)								
	cument #07218220		*	İ				
_	5. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)							
	15a. ORGANIZATION'S N		o ranki (akina aa nama	an Annon announce (announce)	1			
	MORTGAGE ELE	ECTRONIC RE	GISTRATION SYSTEMS	, INC.	1			
OR	15b. INDIVIDUAL'S LAST		FIRST NAME	MIDDLE NAME, SUFFIX				
					1			
16.1	MISCELLANEOUS	6						
	ADDITIONAL DERIVOR	700					S FOR FILING OFFICE U	SE ONLY
	17a, ORGANIZATION'S NA		LF.GA L NAME - insert only one n	ame (1/a or 1/b) - do not abbre	viate of combine name	<u> </u>		
OR			<u></u>	·				1
VIX	176. INDIVIDUAL'S LAST I	NAME		FIRST NAME	:	MIDDLE	NAME	SUFFIX
17c.	MAILING ADDRESS			СПУ		STATE	POSTAL CODE	COUNTRY
17d.	SEEINSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	17e. TYPE OF ORGANIZATION	11 CHURISDICTION OF ORGA	INIZATION	17g. ORG	SANIZATIONAL ID#, if any	NONE
18.	ADDITIONAL DEBTO		. LEGAL NAME - insert only one n	ame (18s or 18b) - do not abbre	viate or combine name			IVOINE
	18a. ORGANIZATION'S NA			0,				
OR	18b. INDIVIDUAL'S LAST I	NAME		IFIRST NAME		MIDDLE I	VAME	SUFFIX
	100. WENT DONE SEAST	NAME		FIRST NAME	Χ,	MIJODEL I	van.	307712
18c.	MAILING ADDRESS			СПҮ		STATE	POSTAL CODE	COUNTRY
18d.	SEEINSTRUCTIONS		18e. TYPE OF ORGANIZATION	18f. JURISDICTION OF ORGA	NIZATION	18g. ORG	ANIZATIONAL ID #, if any	<u> </u>
		ORGANIZATION DEBTOR		I	(0)			NONE
			LEGAL NAME - insert only one n	ame (19a or 19b) - do not abbre	viate or combine nam		•	
	19a. ORGANIZATION'S NA	AME				7,')	
OR								Laucèv
	19b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE N/ ME		SUFFIX	
19c.	MAILING ADDRESS			CITY		STATE	POSTAL COUF	COUNTRY
							, ()	
19d.	SEEINSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	19e. TYPE OF ORGANIZATION	19f. JURISDICTION OF ORGA	INIZATION	19g. ORG	ANIZATIONAL ID Not any	NONE
20,	ADDITIONAL SECUR		AME (or Name of TOTAL ASSIGNE	E) - insert only one name (20a o	r 20b)			
	Merrill Lynch Ban							
OR	20b. INDIVIDUAL'S LAST	NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
20c. MAILING ADDRESS				СПУ		STATE	POSTAL CODE	COUNTRY
c/o Bank of America, N.A., as servicer, Hearst Tower, 214 North Tryon Street				Charlotte		NC	28255	USA
21.	ADDITIONAL SECUR 21a. ORGANIZATION'S NA		AME (or Name of TOTAL ASSIGNE	E) - insert only <u>one</u> name (21s o	r 21b)			
	Merrill Lynch Mor	tgage Lending.	Inc.					
OR	Merrill Lynch Moi 215. INDIVIDUAL'S LAST	NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
210	MAILING ADDRESS			Cmy		STATE	POSTAL CODE	COUNTRY
c/o Bank of America, N.A., as servicer, Hearst Tower, 214 North Tryon Street				Charlotte		NC	28255	USA

1215341057 Page: 4 of 5

UNOFFICIAL COPY

		STATEMENT (front and back)	「AMENDMENT ADD CAREFULLY	HTIC	ONAL PARTY				
		•	# (same as item 1a on Amendmen	ıt form)					
		37 filed 8/6/200	•						
15, NAME OF	PARTY AU	THORIZING THIS	AMENDMENT (same as item 9	on Arr	endment form)				
15a. ORGA	NIZATION'S N	IAME							
MORTO	GAGE ELI	ECTRONIC RE	GISTRATION SYSTEMS	, INC	2.				
OR 15b. INDIVI	DUAL'S LAST	NAME	FIRST NAME		MIDDLE NAME, SUFFIX				
16. MISCELLA	NEOUS	1000				THE AROVE	SPACE I	S FOR FILING OFFICE	USE ONLY
17 ADDITION	Ai DERTO	R'S EXACT FULL	LCG/.L MAME - insert only one n	ame (1	7a or 17b) - do not abhrevista				002 01121
	NIZATION'S N		Edd at Provid - House only 1919 in	anne (Fa Gr 170) - GO HOC BLOS GVILLE	or combine name	<u>-</u>		
OR 17h MOWE	DUAL'S LAST	NAME	OX.	FIRS	TNAME		MIDDLE	NAME	SUFFIX
I I D. HALIVE	ount a tual	W NTIL		"	+ 1-4-101 <u>1</u>			···-	
17c, MAILING AI	nnocee			CITY			STATE	POSTAL CODE	COUNTRY
ITC. MAILING A	JUNESS			10					
17d. SEEINSTR	UCTIONS	JADDI INFO RE T	17e. TYPE OF ORGANIZATION		JURISDICTION OF ORGANIZA	ATION	17a, ORC	ANIZATIONAL ID #, if any	1
		ORGANIZATION '						,	NONE
ADDITION	AL DERTO	DEBTOR	LEGAL NAME - insert only one n		I Do as ABba do ant abbas into	or combine name			NONE
	NIZATION'S N		LEGAL RAMIC - Insert only one in	ame (O NOT SECURITION	or contone name	<u> </u>		
OR 18b. INDIVI	DIAL'S LAST	NAME	10.89	TEIRS	TNAME		MIDDLE	NAME	ISUFFIX
100. 1145111	DONE O DADI	TUTAL		""	A PRIME				
 8c. MAILING A	nnocee			CITY			STATE	POSTAL CODE	COUNTRY
IDU. MINILIIYO N	DORESS			""				33112 3332	
8d. SEEINSTR	LICTIONS	TADOU INFO RE TO	18e, TYPE OF ORGANIZATION	186	JURISDICTION OF ORGANIZA	ATION	18a OR0	SANIZATIONAL ID #, if any	
OU. SEE HISTORY	<u> </u>	ORGANIZATION '	iou, in con oncome	1.5				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	NONE
40 ADDITION	A DERTO	DEBTOR	LEGAL MANEY	1 .			-		NONE
	NIZATION'S N		LEGAL NAME - insert only one n	ame (1	19a or 19b) - do not abbreviate	or combine name	1)	
							O.		
OR 19b. INDIVI	DUAL'S LAST	NAME		FIRS	TNAME		MIDDLE	N. ME	SUFFIX
1								Vic.	
19c. MAILING AI	DDRESS			СПУ			STATE	POSTAL COOT	COUNTRY
								Co	
19d. SEE INSTR	UCTIONS	ADD'L INFO RE	19e, TYPE OF ORGANIZATION	191.	JURISDICTION OF ORGANIZ	ATION	19g. OR	SANIZATIONAL ID », : any	
		ORGANIZATION '		í			I		NONE
	AL SECUR	ED PARTY'S NA	AME (or Name of TOTAL ASSIGNE	E) - ins	ert only <u>one</u> name (20a or 20t)			
			no nya						
	EAL ESTA	TE SECURITII	ES INC.	Inpo	ST NAME		MIDDLE	NAME	SUFFIX
200. INDIVI	UUALS LASI	NAME		"	I IIAML		WILDOLL.	, w tivil	00,150
20c. MAILING A	NADESS.			cmy	,		STATE	POSTAL CODE	COUNTRY
		se convicer Hearst T	ower, 214 North Tryon Street	1	arlotte		NC	28255	USA
				_	****		1.10	1 = 3 = 3 = 3 = 3 = 3 = 3 = 3	10011
21a. ORGA	NIZATION'S N	AME	AME (or Name of TOTAL ASSIGNE	⊆) - IM	ert only <u>one</u> name (218 of 21)	η			
		UCA, N.A.		Teles	T HAME		IMION F	NAME.	Teneciv
215, INDIVI	DUAL'S LAST	NAME		FIRE	ST NAME		MIDDLE	ITOME	SUFFIX
21c. MAILING A	DDRESS		·	CITY			STATE	POSTAL CODE	COUNTRY
c/o Bank of America, N.A., as servicer, Hearst Tower, 214 North Tryon Street					arlotte		NC	28255	USA

1215341057 Page: 5 of 5

UNOFFICIAL COPY

0721822037 Page: 3 of 3

Chicago-Matteson, IL #1017

Exhibit A

LOT 29 IN S/W CORPORATE PARK RESUBDIVISION, BEING A RESUBDIVISION OF LOTS 1, 2, 3, 14, 15, 26, 27 AND 28 IN S/W CORPORATE PARK, BEING A SUBDIVISION OF PART OF THE SOUTHEAST 1/4 OF SECTION 21, TOWNSHIP 35 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF Opening Clarks Office RECOPUSI APRIL 19, 1989 AS DOCUMENT 89172767, IN COOK COUNTY, ILLINOIS.

NCLIB1 314196.1

Order: Non-Order Search Doc: 0721822037

Public Record