

UNOFFICIAL COPY



Doc#: 1308839013 Fee: \$40.00
RHSP Fee: \$10.00 Affidavit Fee:
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 03/29/2013 08:44 AM Pg: 1 of 1

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
773-761-5205

B. SEND ACKNOWLEDGMENT TO: (Name and Address)
Springleaf Financial Serv of IL
f/k/a American General Finc Serv
7414 N Western Ave
Chicago IL 60645

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #

Doc#0803703203 Recorded 02/06/2008

1b. This FINANCING STATEMENT AMENDMENT is
 to be filed [for record] (or recorded) in the
REAL ESTATE RECORDS.

2. 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 security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. ASSIGNMENT (full or partial): Give name of assignor in item 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 affects Debtor or Secured Party of record. Check only one of these two boxes.
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party. DELETE name: Give record name to be deleted in item 6a or 6b. ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7e-7g (if applicable).

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S LAST NAME: Davidson
FIRST NAME: Donna & Donald
MIDDLE NAME: SUFFIX:

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S LAST NAME: FIRST NAME: MIDDLE NAME: SUFFIX:

7c. MAILING ADDRESS: CITY: STATE: POSTAL CODE: COUNTRY:

7d. SEE INSTRUCTIONS | ADD'L INFO RE ORGANIZATION DEBTOR | 7e. TYPE OF ORGANIZATION | 7f. JURISDICTION OF ORGANIZATION | 7g. ORGANIZATIONAL ID #, if any

8. AMENDMENT (COLLATERAL CHANGE): check only one box.
Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned. NONE

Vinyl Windows
Pin#32-06-305-009 ✓
Legal Description: Lot 9 in block 21 in Flossmoor Park addition, being a subdivision of the northeast 1/4 of the southwest 1/4 of section 6, township 35 north range 14, east of the third principal meridian, in Cook County Illinois
Address: 807 Latimer Ln Flossmoor IL 60422

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.

9a. ORGANIZATION'S NAME
OR
9b. INDIVIDUAL'S LAST NAME: Springleaf Financial Services Of IL f/k/a American General Financial Serv
FIRST NAME: MIDDLE NAME: SUFFIX:

10. OPTIONAL FILER REFERENCE DATA

Handwritten signature/initials on the right margin.