UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141 B. E-MAIL CONTACT AT FILER (optional) ${\tt CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com}$ C. SEND ACKNOWLEDGMENT TO: (Name and Address) 15715 - Bank Financial -**CT Lien Solutions** 44135508



Doc#: 1420915146 Fee: \$40.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 07/28/2014 01:13 PM Pg: 1 of 2

Glendale, CA 91209-9071 File w th: Cook, IL a. INITIAL FINANCING STATEMENT FILE NI MBER	ILIL FIXTURE	اٰل			
		1 THE ARCY	VE SPACE IS FOR FILING OF	FICE USE ONLY	
I INTIAL FINANCING STATEMENT IN LIMINOPEN			S STATEMENT AMENDMENT is to		
016034008 6/9/2010 CC IL Cocic		for recorded) in	(or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13		
▼ TERMINATION: Effectiveness of the Financing Sustement	nt identified above is terminated				
ASSIGNMENT (full or partial): Provide name of Assign For partial assignment, complete items 7 and 9 and also	e in item 7a or 7b, <u>and</u> address	of Assignee in item 7c and nem 8	name of Assignor in item 9		
CONTINUATION: Effectiveness of the Financing Statem continued for the additional period provided by applicable	ent ide itified above with respe e law	ct to the security interest(s) o	f Secured Party authorizing this Con	tinuation Statement is	
PARTY INFORMATION CHANGE:					
Check one of these two boxes:	AND Check the of tiese three			ETÉ name: Give record name	
This Change affects Debtor or Secured Party of record		d/or address: Complete itom 7a or 7b <u>and</u> item 7c	7a or 7b, and item 7cto be	deleted in item 6a or 6b	
CURRENT RECORD INFORMATION: Complete for Party In	formation Change - provide on	y one name (6a or 6b)			
6a. ORGANIZATION'S NAME		0,			
RRF, LLC	I CIDST DE	RSONAL LAME	ADDITIONAL NAME(SVINIT	IAL(S) SUFFIX	
6b. INDIVIDUAL'S SURNAME	FIRO; FE	GOTAL MANE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
7. CHANGED OR ADDED INFORMATION: Complete for Assignme	nt or Party Information Change - provide	only one name (7a or 7b) (1.2 ex 0	t, full name; do not omit, modify, or abbreviate a	iny part of the Debtor's name)	
7a. ORGANIZATION'S NAME			6		
OR 7b. INDIVIDUAL'S SURNAME			YZ.		
		<u> </u>	776	···	
INDIVIDUAL'S FIRST PERSONAL NAME			0.		
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)				SUFFIX	
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY	
B. COLLATERAL CHANGE: Also check one of these	four boxes: ADD collateral	DELETE collateral	RESTATE covered collate	ral ASSIGN collaters	
Indicate collateral:				S	
				D	
				<u> </u>	
				M .	
		<u></u>		171	
NAME OF SECURED PARTY OF RECORD AUTH	ORIZING THIS AMENDMEN	T: Provide only one name (9a or 9b) (name of Assignor, if this is	an Assignment) ${\sf SC}_{ $	

FIRST PERSONAL NAME

Prepared by CT Lien Solutions, P.O. Box 29071, Glendale, CA 91209-9071 Tel (800) 331-3282

ADDITIONAL NAME(S)/INITIAL(S)

JB

3117/1902044298

If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: KRF, LLC

9a, ORGANIZATION'S NAME BANKFINANCIAL, F.S.B.

9b. INDIVIDUAL'S SURNAME

44135508

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UNOFFICIAL COPY

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

DLLOW INSTRUCTIONS				
INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amer	ndment form	Ì		
016034008 6/9/2010 CC IL Cook				
2. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on A	mendment form			
12a, ORGANIZATION'S NAME	1			
BANKFINANCIAL, F.S.B.				
OR 12b. INDIVIDUAL'S SURNAME				
120. INDIVIDUAL O COLUMNIA				
FIRST PERSONAL NAME				
0.				
ADDITIONAL NAME(SYINITIAL(S)	SUFFIX			
Α,		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY		
13. Name of DEBTOR on related financing statement (Name of a current Debtor	of record required for in	lexing purposes only in son	ne filing offices - see Instruction item	13): Provide only
 Name of DEBTOR on related financing statement (Name of a current Debtor one Debtor name (13a or 13b) (use exact, full name: do not omit, modify, or 	abbreviate any part of the	e Debtor's name); see instr	uctions it harne does not in	
13a. ORGANIZATION'S NAME				
KRF, LLC	FIRST PERSONAL NA	ac .	ADDITIONAL NAME(SYMITIAL(S)	SUFFIX
13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	VIE.	ADDITIONAL INTERCOPTION ACO,	
		<u> </u>		
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):				
Debtor Name and Address: KRF, LLC - 917 Foster St. , Evanston, IL 60201	τ_{\sim}			
Secured Party Name and Address: BANKFINANCIAL, F.S.B 15W060 NORTH FRONTAGE ROAD	, BURR RIJGE, IL	60527		
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15. This FINANCING STATEMENT AMENDMENT:	i	Description of real estate:		ELED AND
covers timber to be cut covers as-extracted collateral is file		HERS SURDIVISION	FLOT 6 IN BLOCK 2 IN WHE OF THAT PART OF THE NO	RTH 1/2 OF
 Name and address of a RECORD OWNER of real estate described in item (if Debtor does not have a record interest): 	''' Iты	IE NORTH FAST 1/4 (OF THE NORTH WEST 1/4 L	YING WEST O
(III DEDICH GOOS NOT HAVE A FOODY WHO COST).	lei	SHERMAN AVENUE IN SECTION 18, TOWNSHIP 41 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN (EXCEP		
	1 170	IE SOUTH WEST 1/2	OF A PIECE OF GROUND II	ENFEEL
	19	THARE IN THE SOUT	H WEST CORNER OF THE B	-AS 125 FEE
	0	FLOT 6 IN BLOCK 2 A	AFORESAID), IN COOK COU	NIY, ILLINOIS
	P	arcel ID:		
	11	-18-104-032-0000		
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