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UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional)	Doc#: 1425819041 Fee: \$40.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00		
Kathy Pearson (801) 747-7161 267753 B. EMAIL CONTACT AT FILER (optional)	Cook County Records at D		
kpearson@medallion.com	Date: 09/15/2014 10:26 AM Pg: 1 of 2		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	- 1 g. 1 or 2		
MEDALLION BANK	· ·		
1100 EAST 6600 SOUTH, SUITE 510			
SALT LAKE CITY, UT 84121			
FILED IN: COOK, IL			
INITIAL FINANCING STATEMENT F"L": NUMBER 15. D	Or recorded) in the DEAL ESTATE DESCRIPTION OF THE ORIGINAL PROPERTY.		
TERMINATION: Effectiveness of the Financiary Statement identified above is terminated with Statement	Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in Item 13		
Statement	with respect to the security interest(s) of Secured Party authorizing this Termination		
ASSIGNMENT (full or partial): Provide name of A sign; e.ir item 7a or 7b, and address of For partial assignment, complete items 7 and 9 and also include affected collateral in item 8	Assignee in item 7c and name of Assignor in item 9		
CONTINUATION: Effectiveness of the Financing Statement dentific J above with respect to continued for the additional period provided by applicable law	o the security interest(s) of Secured Party authorizing this Continuation Statement is		
PARTY INFORMATION CHANGE:			
Check one of these two boxes: AND Check one of these two boxes: This Change affects Deblor or Secured Party of	es 10;		
record CHANGE name and/c ado, item 6a or 6b; and ite n 7a o	ass: Complete ADD name: Complete item DELETE name: Give record asset		
URRENT RECORD INFORMATION: Complete for Party Information Change - provide only s	7b and item 7c DELETE name: Give record name to be deleted in item 6a or 6b		
02. ORGANIZATION'S NAME	e n. me (ba or 6b)		
6b. INDIVIDUAL'S SURNAME	4		
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UCC FINANCING STATEMENT AMENDMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS	DITIONAL PAR	1 7	
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment in 1414739022	orm		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment	-16		
128. ORGANIZATION'S NAME	nt form		
MEDALLION BANK			
OR			
12b.INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
		ROVE SPACE IS FOR FULLY	
13 Name of DEBTOR on related financing statement (Name of a current Debtor of record required for one Debtor name (13a or 13b) (u. e. ex. lct. full name; do not omit, modify, or abbreviate any part of 13a. ORGANIZATION'S NAME	r indexing puposes only in some filin	BOVE SPACE IS FOR FILING OFF ig offices - see instructions item 13): Prov	ICE USE ONLY
13a. ORGANIZATION'S NAME	t are Debut's flame), see instruction	is if name does not fit	
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4. ADDITIONAL SPACE FOR ITEM 8 (Collateral): Detached 14 x 22 garage - Fixture Filing			Jr.
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