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1100	FINANCING STATEMENT AMEN	DMENT	,	} <b>*************</b> ***********************	Kana dang daka dang ang baga dan		
	WINSTRUCTIONS						
	ME & PHONE OF CONTACT AT FILER (optional)	******	1	1511	744 <b>0</b> 08		
	rbara Lenio - 215-631-9151			Doc#: 151	1744008 Fee	\$40.00	
ľ	MAIL CONTACT AT FILER (optional) Irbara.Lenio@opco.com			Karen A.Yaıbrı	00 RPRF Fee: \$	1.00	
	ND ACKNOWLEDGMENT TO: (Name and Address)				lecorder of Deec	ls	
l	Barbara Lenio	コ		Date: 04/27/20	15 10:32 AM Pg	j: 1 of 2	
	Barbara Lemo Oppenheimer Multifamily Housing & Hea	l olthcare Finance.					
	Inc.	· · · · · · · · · · · · · · · · · · ·					
1 .	1180 Welsh Road Suite 210						
	North Wales, PA 15454		THE ARC	OVE SPACE IS FOR FIL	ING OFFICE USE U	INLT	
1a. ∣N!⁻	TIAL FINANCING STATEMENT FULL NUMBER		1b. This FINANCIN	G STATEMENT AMENDME	ENT is to be filed [for r		
	6929085		(or recorded) in Filer, <u>attach</u> Ame	n the REAL ESTATE RECO Endment Addendum (Form UCC	RDS C3Ad) <u>and provide Debtor</u>	's name in item 13	
	TERMINATION: Effectiveness of the Fit anding Statement is Statement	dentified above is terminated v	vith respect to the secu	urity interest(s) of Secured	Party authorizing this	Termination	
3.	ASSIGNMENT (full or partial): Provide name of Assign For partial assignment, complete items 7 and 9 and also indice	item 7a or 7b, <u>and</u> address o ate affected collateral in item t	f Assignee in item 7c <u>a</u> 3	nd name of Assignor in iter	m 9		
4. 7	CONTINUATION: Effectiveness of the Financing Statem in continued for the additional period provided by applicable law	t identified above with respect		t(s) of Secured Party author	orizing this Continuatio	n Statement is	
	PARTY INFORMATION CHANGE:						
		ND Check or af these three b		ADD Complete item	nDELETE name: (	Cive record name	
	Change affects Debtor or Secured Party of record	CHAN 3E name and/or a item 6a or 6 <sup>t</sup> , and tem	address: Complete 7a or 7b <u>and</u> item 7c	ADD name: Complete iten 7a or 7b, <u>and</u> item 7c	to be deleted in it	em 6a or 6b	
_	RRENT RECORD INFORMATION: Complete for Party Info	ormation Change - p. ovide only	<u>опе</u> name (6a or 6b)				
6a	a. ORGANIZATION'S NAME	9					
OR 6	D. INDIVIDUAL'S SURNAME	FIRST PERSOI	NAL NA ME	ADDITIONAL N	NAME(S)/INITIAL(S)	SUFFIX	
	ANGED OR ADDED INFORMATION: Complete for Assignmen	t or Party Information Change - provide	only one name (7a or o) (u.	exact, full name; do not omit, mo	dify, or abbreviate any part of	the Debtor's name)	
"	S. ORGANIZATION S NAME				•		
OR 7	OR 7b. INDIVIDUAL'S SURNAME						
į				T'			
	INDIVIDUAL'S FIRST PERSONAL NAME			0, ~			
_	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX	
	THE PROPERTY OF THE PROPERTY O				)Ç.		
7c. M	AILING ADDRESS	CITY		STATE POS	STAL CO.)E	COUNTRY	
					70	_	
8. [	COLLATERAL CHANGE: Also check one of these four box	xes: ADD collateral	DELETE collateral	RESTATE covere	ed collateral	ASSIGN collatera	
	Indicate collateral:						
					Sec. 110	0/1	
					$\mathcal{J}_{\mathbf{i}}$	-fr	
					2	<del></del>	
						<i></i>	
	AME OF SECURED PARTY OF RECORD AUTHORI	ZING THIS AMENDMENT	Provide only one name	(9a or 9b) (name of Assigno	or if this is an Assignment	20	
9. N/	AME OF SECURED PARTY OF RECORD AUTHORI. this is an Amendment authorized by a DEBTOR, check here	and provide name of authoriz		(52 of 50) (Hamo of Assigni			
[9	9a. ORGANIZATION'S NAME	~ 0. II.a.l4b I	inance Inc		· <b>6</b>	ie)	
OR -	Oppenheimer Multifamily Housing Housing Housing	g & Healthcare F	MAL NAME	ADDITIONAL	NAME(S)/INITIAL(S)	SUFFIX	
	BD. INDIVIDUAL 5 SURNAME	T ING T ENG			, T	12)	

10. OPTIONAL FILER REFERENCE DATA:

1511744008 Page: 2 of 2

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	CC FINANCING STATEMENT AMENDMENT LOWINSTRUCTIONS	T ADDENDUM						
	INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Ar ${f 016929085}$	mendment form						
	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 of 12a, ORGANIZATION'S NAME							
	Oppenheimer Multifamily Housing & Healt							
	Finance, Inc.							
OR	12b. INDIVIDUAL'S SURNAME							
	FIRST PERSONAL NAME.							
	ADDITIONAL MANE OVALUE OF A	Journa						
	ADDITIONAL NAME(S)/INITI/_(S)	SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE I	USE ONLY				
13,	Name of DEBTOR on related financing statement (Name of a current Debt		ing purposes only in some filing offices - see Instruction item					
	one Debtor name (13a or 13b) (use exact, full nam , do not omit, modify, or abbre 13a ORGANIZATION'S NAME	eviate any part of the Debtor's	name); see Instructions if name does not fit					
	Grant Village							
OR	13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX				
14	ADDITIONAL SPACE FOR ITEM 8 (Collateral):							
	DDITIONAL INTEREST:	4						
	cretary of Housing & Urban Development							
	S. Department of Housing & Urban Development West Jackson Boulevard							
	nicago, IL 60604 USA	040						
	EGAL DESCRIPTION: PARCEL 1: THE SOUTH 6	1///	e. THE WEST 200 FEET OF LOT (A)	IN				
	REDERICK B, CLARK'S SUBDIVISION OF LOTS							
2	IN BAYARD & PALMER ADDITION IN THE NOR	THWEST FRACTI	OI (AL QUARTER OF SECTION 2, TO					
38	NORTH, RANGE 14, EAST OF THE THIRD PRIN	CIPAL MERIDIAN	I, IN COOK COUNTY, ILLINOIS.					
	ARCEL 2: THE NORTH 10 FEET OF LOT 31 & LO							
B	LOCKS 3 & 4 & LOTS 1 & 2 IN BARRY'S SUBDIVI	SION OF LOTS 28	, 29 & 30 & THE SOUTH 15 FEET OF	LOT 31,				
ALL IN BLOCK 3 IN THE RESUBDIVISION OF REFORM SCHOOL PROPERTY, BEING THE SOUTH 25 ACRES OF THE NORTHWEST FRACTIONAL HALF OF SECTION 2, TOWNSHIP 38 NORTH, RANG É 14, EAST OF THE THIRD								
	RINCIPAL MERIDIAN, IN COOK COUNTY, ILLIN							
Di	N; 20-02-113-018; 20-02-120-001; 20-02-120-002; 20-0	n2120005+ 20 <u>.</u> 02.11	20-029					
r	114. 20-02-113-016, 20-02-120-001, 20-02-120-002, 20-0	JZ-120-003, 20-0 <u>2</u> -1.	20-02)					
15.	This FINANCING STATEMENT AMENDMENT:	17. Descripti	on of real estate;					
		s a fixture filing COMM	ION ADDRESSES:					
Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):			Grant Village Apartments					
Grant Village			4151 Drexel Boulevard Chicago, IL 60653 USA					
4151 Drexei Boulevard			1, 1E 00033 USA					
C	hicago, IL 60653 USA							
		ļ						

International Association of Commercial Administrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT ADDENDUM (Form UCC3Ad) (Rev. 04/20/11)

18. MISCELLANEOUS: