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Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 05/04/2015 02:16 PM Pg: 1 of 1

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) JOSEPHINE P ANDERS 708-566-8395 X 1027
B. E-MAIL CONTACT AT FILER (optional) janders@providencebank.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) PROVIDENCE BANK & TRUST 5225 WEST 25TH STREET CICERO, ILLINOIS 60804

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 1227516006 10/01/2012 UCC IL COOK	1b. <input checked="" type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13
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2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. PARTY INFORMATION CHANGE:

Check one of these two boxes:

AND Check one of these three boxes to:

This Change affects Debtor or Secured Party of record CHANGE name and/or address: Complete item 6a or 6b and item 7a or 7b and item 7c ADD name: Complete item 7a or 7b, and item 7c DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
DE LA TORRE	JORGE		

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b), use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name

7a. ORGANIZATION'S NAME			
OR 7b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
PROVIDENCE BANK & TRUST			
INDIVIDUAL'S FIRST PERSONAL NAME			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
630 E 162ND STREET, PO BOX 706	SOUTH HOLLAND	IL	60473	USA

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral
Indicate collateral:

LOT 1 IN THE SUBDIVISION OF LOTS 19 AND 24 INCLUSIVE IN BLOCK 5 IN SAMPSON AND GREEN'S ADDITION TO CHICAGO, IN SECTION 20, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. PIN #17-20-108-001-0000 AKA 1301 SOUTH ASHLAND AVE., CHICAGO, IL 60608 ALL ASSETS INCLUDING BUT NOT LIMITED TO FURNISHINGS, FIXTURES, AND EQUIPMENT ON THE PREMISES FIXTURES;

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
GREENCHOICE BANK, FSB			

10. OPTIONAL FILER REFERENCE DATA:
81638205-10 De La Torre