## **UNOFFICIAL COPY**

|                                                                                                                                                                                                                                                                                                                              | ,                                                                                         | 1513145633                                            |                                                                                                                                                     |                    |                                  |                                         |         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------------------|-----------------------------------------|---------|
| UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS                                                                                                                                                                                                                                                                        |                                                                                           |                                                       | Doc#: 1513145038 Fee: \$40.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00 Karen A.Yarbrough Cook County Recorder of Deeds Date: 05/11/2015 08:54 AM Pg: 1 of 1 |                    |                                  |                                         |         |
| A. NAME & PHONE OF CONTACT AT FILER (optional)  Kaitlyn Sportel                                                                                                                                                                                                                                                              | 320-978-6351                                                                              |                                                       |                                                                                                                                                     |                    |                                  |                                         |         |
| B. E-MAIL CONTACT AT FILER (optional)  kaitlyns@prinsbank.com                                                                                                                                                                                                                                                                | 320-910-0301                                                                              | <u></u>                                               |                                                                                                                                                     |                    |                                  |                                         |         |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address)                                                                                                                                                                                                                                                                                |                                                                                           |                                                       |                                                                                                                                                     |                    |                                  |                                         |         |
| Kaitlyn Sportel                                                                                                                                                                                                                                                                                                              |                                                                                           |                                                       |                                                                                                                                                     |                    |                                  |                                         |         |
| PO BOX 38                                                                                                                                                                                                                                                                                                                    |                                                                                           |                                                       |                                                                                                                                                     |                    |                                  |                                         |         |
| Finsburg, MN, 5628                                                                                                                                                                                                                                                                                                           | 1                                                                                         | [                                                     | THE                                                                                                                                                 | ADOVE 6            | PACE IS FOR FILING OF            | 505 HG 5 044 V                          |         |
| INITIAL FINANCING STATEMENT FILE                                                                                                                                                                                                                                                                                             |                                                                                           | 1b. This FINA                                         | ANCING STATE                                                                                                                                        | MENT AM            | ENDMENT is to be filed           |                                         |         |
| 217422079                                                                                                                                                                                                                                                                                                                    |                                                                                           |                                                       | led) in the REAL<br>mendment Adde                                                                                                                   |                    | RECORDS<br>rm UCC3Ad) and provid | le Debtor's name in                     | item 13 |
| TERMINATION; Effectiveness of the Financing State nent identified                                                                                                                                                                                                                                                            | I above is terminated with                                                                | respect to the sec                                    | urity interest(s) o                                                                                                                                 | Secured            | Party authorizing this Te        | rmination Statemen                      | ıt.     |
| ASSIGNMENT (full or partial): Provide name of sale new for partial assignment, complete items 7 and 9 and also in locate after                                                                                                                                                                                               | ee in item 7a or 7b, and ad                                                               | Idress of Assignee                                    | in Item 7c and                                                                                                                                      | name of A          | ssingor in item 9                |                                         |         |
| CONTINUATION: Effectiveness of the Financing Statement identification continued for the additional period provided by applicable law.                                                                                                                                                                                        | k i above with respect to s                                                               | security interest(s)                                  | of the Secured F                                                                                                                                    | arty auth          | orizing this Continuation        | Statement is                            |         |
| PARTY INFORMATION CHANGE:                                                                                                                                                                                                                                                                                                    | 7                                                                                         |                                                       |                                                                                                                                                     | •                  |                                  |                                         |         |
|                                                                                                                                                                                                                                                                                                                              | heck on J of the Latree bo                                                                |                                                       | ADD rs                                                                                                                                              | me: Cor            | nniete item DELETE               | name: Ohie seen                         | -d      |
| This Change affects Debtor or Secured Party of record  CURRENT RECORD INFORMATION: Complete for Party Informat                                                                                                                                                                                                               | CHANGE ame ar dor a tem 6a of b; and item                                                 |                                                       | 7c <u></u> 7a or 7                                                                                                                                  | b, and ite         | m 7c DELETE<br>m 7c to be de     | name: Give recor<br>leted in Item 6a or | 6b.     |
| 6a. ORGANIZATION'S NAME                                                                                                                                                                                                                                                                                                      | ion Change - prov de o le                                                                 | name (6a or 6b)                                       |                                                                                                                                                     |                    |                                  |                                         |         |
|                                                                                                                                                                                                                                                                                                                              |                                                                                           | <u></u>                                               |                                                                                                                                                     |                    |                                  |                                         |         |
| 6b. INDIVIDUAL'S SURNAME                                                                                                                                                                                                                                                                                                     | FIRST PERSOI                                                                              | NAL NA 4E                                             | -                                                                                                                                                   | ADDITIO            | DNAL NAME(S)/INITIAL(S           | ) SUFFIX                                |         |
| CHANGED OR ADDED INFORMATION: Complete for Assignment                                                                                                                                                                                                                                                                        | or Borty Information Cha-                                                                 |                                                       |                                                                                                                                                     | 753.6              |                                  |                                         |         |
| or abbreviate any part of the Debtor's name)                                                                                                                                                                                                                                                                                 | of Party Information Chan                                                                 | ige - provide on y                                    | one Hame (7a or                                                                                                                                     | /D) (use           | exact, full name; do not         | omit, modify,                           |         |
| 7a. ORGANIZATION'S NAME                                                                                                                                                                                                                                                                                                      |                                                                                           |                                                       | (A)                                                                                                                                                 |                    |                                  |                                         |         |
| Greenwich Investors XLVII Trust 2014-1                                                                                                                                                                                                                                                                                       |                                                                                           |                                                       |                                                                                                                                                     | -/                 |                                  |                                         |         |
| 75. INDIVIDUAL'S SURNAME                                                                                                                                                                                                                                                                                                     |                                                                                           |                                                       | -                                                                                                                                                   | 9,                 |                                  |                                         |         |
| INDIVIDUAL'S FIRST PERSONAL NAME                                                                                                                                                                                                                                                                                             |                                                                                           |                                                       |                                                                                                                                                     |                    | <u> </u>                         |                                         |         |
|                                                                                                                                                                                                                                                                                                                              |                                                                                           |                                                       |                                                                                                                                                     |                    | UKC.                             |                                         |         |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)                                                                                                                                                                                                                                                                                   |                                                                                           |                                                       |                                                                                                                                                     |                    | 100                              | SUFFIX                                  |         |
| MAILING ADDRESS  D BOX 38                                                                                                                                                                                                                                                                                                    | CITY                                                                                      |                                                       | -                                                                                                                                                   | STATE              | POSTAL COL                       | COUNTRY                                 |         |
|                                                                                                                                                                                                                                                                                                                              | Prinsburg                                                                                 |                                                       |                                                                                                                                                     | MN                 | 56281                            | USA                                     |         |
| COLLATERAL CHANGE: Also check one of these four boxes: ALL ASSETS INCLUDING, BUT NOT EQUIPMENT ON THE PREMISES EQUIPMENT ON THE PREMISES EQUIPMENT ON THE PREMISES EQUIPMENT ON THE WEST 1/2 OF BLOCKS 6 AND 12 AND THE WEST 1/2 PARK, IN THE NORTHEAST 1/4 OF SECTION OF SECTION OF THE PRINCIPAL MERIDIAN, IN COOK COUNTY, | <b>QUIPMOENT; FIXTUI</b><br>OF LOT 9 IN BLOCK<br>2 OF BLOCK 11 OF B<br>ION 28. TOWNSHIP 3 | NISHINGS, F<br>RES;<br>12 IN CHARLES<br>AIRD AND BRAG | S M. SMITH'S<br>DIFY'S ADDIT                                                                                                                        | <b>ND</b><br>SUBOI | VISION<br>MORTON                 | rai                                     |         |
|                                                                                                                                                                                                                                                                                                                              |                                                                                           | DIC (000'                                             |                                                                                                                                                     |                    |                                  |                                         | 9       |
| PROPERTY ADDRESS: 5432 W. 25TH STRE<br>P.I.N. 16-28-121-027-0000                                                                                                                                                                                                                                                             | ici GICERU, ILLIN                                                                         | U12 6U8U4                                             |                                                                                                                                                     |                    |                                  |                                         | _       |
| IAME OF SECTION DARRY OF PERSONS AND LONGING THE                                                                                                                                                                                                                                                                             | AD CENTRAL -                                                                              |                                                       |                                                                                                                                                     |                    |                                  |                                         |         |
| AME OF SECURED PARTY OF RECORD AUTHORIZING THIS<br>this is an Amendment authorized by a DEBTOR, check here and pr                                                                                                                                                                                                            |                                                                                           |                                                       | a or 9b) (name o                                                                                                                                    | f Assigno          | r, if this is an Assignment      | )                                       | C       |
| 9a. ORGANIZATION'S NAME                                                                                                                                                                                                                                                                                                      |                                                                                           |                                                       | <del></del>                                                                                                                                         |                    |                                  |                                         |         |
| Greenchoice Bank                                                                                                                                                                                                                                                                                                             |                                                                                           |                                                       |                                                                                                                                                     |                    |                                  |                                         | N.      |

FIRST PERSONAL NAME

ADDITIONAL NAME(S)INITIAL(S)

10. OPTIONAL FILER REFERENCE DATA

Juan Serrano