## UNOFFICIAL COPY

				1517344202			
UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS		Doc#: 1517349002 Fee: \$40.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00 Karen A.Yarbrough					
A. NAME & PHONE OF CONTACT AT FILER (optional)  JOSEPHINE P ANDERS 708-566-8395			Cook Cour	nty Recorder of Deed 2/2015 08:47 AM P	ds g: 1 of 1		
B. E-MAIL CONTACT AT FILER (optional)		Í					
janders@providencebank.com  C. SEND ACKNOWLEDGMENT TO: (Name and Address)		İ					
<b>!</b>	<u></u>						
PROVIDENCE BANK & TRUST 5225 WEST 25TH STREET							
CICERO, ILLINOIS 60804							
33.30.00004		1					
	I						
1a. INITIAL FINANCING STATEMENT I: ILF NUMBER	·			OR FILING OFFICE USE			
1316348012 06/12/2013 CC IL COOK		(or recorded) in t Filer: attach Amend	he REAL ESTATi Iment Addendum (f	orm UCC3Ad) and provide Del	stor's name in item 13		
<ol> <li>TERMINATION: Effectiveness of the Finuncing Statement ide Statement</li> </ol>	ntified above is terminated w	th respect to the securi	ty interest(s) of S	ecured Party authorizing th	is Termination		
3. ASSIGNMENT (full or partial): Provide name of sistence in it for partial assignment, complete items 7 and 9 and also indicate	em 7a or 7b, <u>and</u> address of a affected collateral in item 8	Assignee in item 7c and	I name of Assign	or in item 9			
4. CONTINUATION: Effectiveness of the Financing Stateme it is continued for the additional period provided by applicable law	den ified above with respect to	o the security interest(s	) of Secured Par	ty authorizing this Continua	tion Statement is		
5. PARTY INFORMATION CHANGE:	<del>-</del> <del>-</del> <del>-</del> -						
	Check wie of these three box						
This Change affects Debtor or Secured Party of record	CHANG in name and/or ad item 6a or 6b; aid item 7a	or 7b and item 7c     1:	ADD name: Comp 7a or 7b, and item	lete item DELETE name 7c DELETE name to be deleted in	Give record name		
CURRENT RECORD INFORMATION: Complete for Party Inform     6a. ORGANIZATION'S NAME	ation Change - pr. vide only or	e name (6a or 6b)		3 00 00 00 00	ACTIVES OF BE		
STORY OF STRAIN	0,	,					
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONA	2 ABAE	ADDITI	ONLAL NIAME (OVER 17)			
MICKELSON	JONATH		ADDITI	ONAL NAME(S)/INITIAL(S)	SUFFIX		
CHANGED OR ADDED INFORMATION: Complete for Assignment or I     A. ORGANIZATION'S NAME	Party Information Change - provide on	y one name (7a or 7b) (use tv	act, full name; do not	omit, modify or abbreviate any part	of the Debtor's name)		
7a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST				, , , , , , , , , , , , , , , , , , ,	or ore people a figure)		
OR 75. INDIVIDUAL'S SURNAME			Q	<u></u>			
		`	1/2.				
INDIVIDUAL'S FIRST PERSONAL NAME			-16				
			0				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				<b>O</b> ~	SUFFIX		
7c. MAILING ADDRESS	1			175.			
	CITY	HOLLAND	STATE	POSTAL CUPE	COUNTRY		
USU E JUZNU SIKEET. PU KUX 706			,	1 (0.472)	i Trans		
8. COLLATERAL CHANGE: Also check one of those four house		<del></del>	IL	60473	USA		
	ADD collateral	DELETE collateral	<del></del>		USA ASSIGN collateral		
8. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:  LOT 1 IN COMMISSIONER'S PARTITION OF	ADD collateral	DELETE collateral	RESTATE O	covered collateral	ASSIGN collateral		
8. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:  LOT 1 IN COMMISSIONER'S PARTITION OF THEREOF) IN SUBDIVISION OF LOT 20 OF	ADD collateral  F LOTS 5, 6, 7, 8, 9  ELISHA BAYLEY	DELETE collateral  AND 10 (EXCE	RESTATE OF THE EAR	AST 6 FEET OF S.	ASSIGN collateral AID LOT 5		
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