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UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141 B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 File with: Cook, IL		
CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 23814 - 23814-WELLS CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 ILIL FIXTURE		
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 FIXTURE	* * * * * * * * * * * * * * * * * * * *	erskluwer.com
P.O. Box 29071 Glendale, CA 91209-9071 L L FIXTURE	C. SEND ACKNOWLEDGMENT TO: (Name and Address)	23814 - 23814-WELLS
Glendale, CA 91209-9071 L L FIXTURE		51008120
		ILIL
File with: Cook, IL		FIXTURE
	File with: Cook, IL	



Doc#: 1531739029 Fee: \$44.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00

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B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 23814 - 23814-WELLS		Karen A.Yarbrough Cook County Recorder of Deeds Date: 11/13/2015 09:28 AM Pg: 1 of 4			
CT Lien Solutions P.O. Box 29071	51008120				
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Ellestrists Cook II		THE ADOLE OF	05 10 500 50 000 0000000000000000000000		
File with: Cook, IL INITIAL FINANCING STATEMENT F LE NUMBER	·	******	MENT AMENDMENT is to be filed if		
531203057 11/8/2005 CC/L Cook		(or recorded) in the REAl Filer: attach Amendment Add	MENT AMENDMENT is to be filed [f L ESTATE RECORDS dendum (Form UCC3Ad) and provide Debi	or's name in item 13	
☐ TERMINATION: Effectiveness of the f in≥ cing Statement id Statement	dentified above is terminated with				
ASSIGNMENT (full or partial): Provide name of fusignee in For partial assignment, complete items 7 and 9 and else indicates and			ssignor in item 9	- II	
CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law	identified above with respect to t	he security interest(s) of Secured	Party authorizing this Continuation	Statement is	
PARTY INFORMATION CHANGE:	WD 00				
Check the of these two boxes.	AND Check ruse of these three box	ddress: Complete ADD nam		Give record name	
This Change affects Debtor or Secured Party of record	item 6"	a or 7b <u>and</u> item 7c 7a or 7b,	and item 7c to be deleted in		
CURRENT RECORD INFORMATION: Complete for Party Inform 6a. ORGANIZATION'S NAME	nation Change - provide only one	name (6a or 6b)			
F and S Limited Partnership	0				
6b. INDIVIDUAL'S SURNAME	FIRST PERSON	I PAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
		70x	ADDITIONAL NAME (O)/INTIAL(O)		
CHANGED OR ADDED INFORMATION: Complete for Assignment or F	Party Information Change - provide only g	17×			
7a. ORGANIZATION'S NAME	Party Information Change - provide only g	17×			
7a. ORGANIZATION'S NAME	Party Information Change - provide only <u>c</u>	17×			
	Party Information Change - provide only g	17×			
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME	Party Information Change - provide only g	17×			
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)	Parry Information Change - provide only g	17×		ne Debtor's name)	
7a. GRGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four bases.	СПУ	ine name (76 or 0) (use exact, full name;	do not omit, modify, or abbreviate any part of the state	ne Debtor's name)	
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four be Indicate collateral:	СПУ	ine name (76 or 0) (use exact, full name;	do not omit, modify, or abbreviate any part of the state	SUFFIX COUNTRY	
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7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S) E. MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four bindicate collateral: DAN # 130001358 EE EXHIBIT A LEGAL DESCRIPTION ATTACHED BY NAME OF SECURED PARTY OF RECORD AUTHORIZ If this is an Amendment authorized by a DEBTOR, check here 9a. ORGANIZATION'S NAME* Wachovia Bank, NA, as Master Servicer on	DOXES: ADD collateral HERETO AND INCORPORE TING THIS AMENDMENT: Pro and provide name of authorizing the behalf of, Bank of Americans	DELETE collateral DELETE collateral RATED HEREIN BY THIS F	do not omit, modify, or abbreviate any part of the state	SUFFIX COUNTRY ASSIGN collatera	
7a. GRGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four be Indicate collateral; DAN # 130001358 EE EXHIBIT A LEGAL DESCRIPTION ATTACHED H NAME OF SECURED PARTY OF RECORD AUTHORIZ If this is an Amendment authorized by a DEBTOR, check here	DOXES: ADD collateral HERETO AND INCORPORE TING THIS AMENDMENT: Pro and provide name of authorizing the behalf of, Bank of Americans	DELETE collateral DELETE collateral PRATED HEREIN BY THIS F	do not omit, modify, or abbreviate any part of the state	SUFFIX COUNTRY ASSIGN collatera	

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UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOI	LOW INSTRUCTIONS	JOIN .		
	NITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form			
	31203057 11/8/2005 CC IL Cook			
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME Wachovia Bank, NA, as Master Servicer on behalf of, Bank of America, NA,		erica. NA.		
	as successor by merger to LaSalle Bank, NA, as Trustee for the b the Certificate Holders of, Its Successors and/or Assigns, Comme Mortgage Pass-Through Certificates Series 2006-C1			
OR	12b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAME			
	ADDITIONAL NAME(SYINITIAI (S)	SUFFIX THE ABO	VE SPACE IS FOR FILING OFFICE US	E ONLY
13,	Name of DEBTOR on related financing s atcrent (Name of a current Debtor of record require one Debtor name (13a or 13b) (use exact, tu" nar a; do not omit, modify, or abbreviate any p	ed for indexing purposes only in	some filing offices see Instruction item	13): Provide only
	13a. ORGANIZATION'S NAME F and S Limited Partnership	art of the Debtor's frame), see	instructions if name does not fit	
OR	13b. INDIVIDUAL'S SURNAME FIRST PERSO	DNAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Sec Wac the 9th The Wac the 201 Cha	of the Name and Address: and S Limited Partnership - 1300 West Belmont , Chicago, IL (30637) ured Party Name and Address: chovia Bank, NA, as Master Servicer on behalf of, Bank of America, NA, as Certificate Holders of, Its Successors and/or Assigns, Commercial Mortgage Floor, NC1075 , Charlotte, NC 28244-1075 complete information for Authorizer number 1 chovia Bank, NA, as Master Servicer on behalf of, Bank of America, NA, as Sertificate Holders of, Its Successors and/or Assigns, Commercial Mortgage South College Street, 9th Floor, NC1075 rlotte, NC 28244-1075	successor by marrier to Le Pass-Through Ce.(if a)	aSalle Bank, NA, as Trustee for the Series 2006-C1	College Street,
	covers timber to be cut covers as-extracted collateral is filed as a fixture filing lame and address of a RECORD OWNER of real estate described in item 17 if Debtor does not have a record interest):	Property Name:	: 1300 WEST BELMO WEST BELMONT (S	NT
		See Exhibit for Real	Estate]	
18. 1	MISCELLANEOUS: 51008120-IL-31 23814 - 23814-WELLS FARGO CM Wachovia Bank, NA, as t	Master Servicer File with: Cook, IL	130001358 AU02058LOAN130001358	

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Debtor: F and S Limited Partnership

Exhibit for Real Estate

17. Description of real estate:

Continued

14-20-330-043-0000



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EXHIBIT A

Legal Description of Property

LOTS 26, 27, 28 AND 29 IN BLOCK 4 IN WILLIAM L. GAUDY'S SUBDIVISION OF THAT PART OF THE SOUTHEAST 1/4 OF THAT PART OF THE SOUTHWEST 1/4 OF SECTION 20, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PUNCIPAL MERIDIAN, LYING WEST OF THE RIGHT OF WAY OF THE CHICAGO, EVANSTON AND LAKE SUPERIOR RAILROAD, IN COOK COUNTY, ILLINOIS.

A-1

38196/0179-2284219v3