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| | C FINANCING STATEMENT AMENDM | IENT | | | 16) 1889 (94) | |
|--------------------------------|--|---|--|---|--|---|
| A. 1 | NAME & PHONE OF CONTACT AT FILER (optional) | | 7 | Doc# | : 1613339047 | Fee: \$42.00 |
| ١ | Vanessa A. Orta 405-236-0003 | | | | Fee:\$9.00 RPRF / | |
| В. Е | E-MAIL CONTACT AT FILER (optional) | | | | A.Yarbrough County Recorder of | Deeds |
| C. 8 | SEND ACKNOWLEDGMENT TO: (Name and Address) | _ | | Date: (| 05/12/2016 02:15 P | M Pg: 1 of 3 |
| | Anderson, McCoy & Orta PC | | l | | | |
| | 100 North Broadway, Suite 2600 | | | | | |
| | Oklahoma City, Ok 73102 | | | | | |
| | - Ć | | | E SPACE IS FO | OR FILING OFFICE US | E ONLY |
| | NITIAL FINANCING STATEMENT FILE NUI BER | | 1b. This FINANCING S | | ENDMENT is to be filed [f | for record] |
| 160 | 01317020 filed 1/13/16 | | Filer: attach Amenda | nent Addendum (Fo | orm UCC3Ad) <u>and</u> provide De | |
| 2. | TERMINATION: Effectiveness of the Financin, Statement identifier Statement | ed above is terminate | d with respect to the security | interest(s) of Se | cured Party authorizing the | his Termination |
| 3. [₹ | ASSIGNMENT (full or partial): Provide name of Assir lee in item For partial assignment, complete items 7 and 9 and also inc. e afficient and second and also inc. | | | name of Assigno | r in item 9 | |
| 4. | CONTINUATION: Effectiveness of the Financing Statement id and continued for the additional period provided by applicable law | ifie I above with resp | ect to the security interest(s) | of Secured Party | authorizing this Continue | ation Statement is |
| 5. | PARTY INFORMATION CHANGE: | | | | | |
| | neck one or these two doxes: | eck <u>or</u> e of thrise three CHANGF or me and/ | or address: Complete A | DD name: Compl | | e: Give record name |
| | nis Change affects Debtor or Secured Party of record | | | a or 7b, <u>and</u> item i | cto be deleted | in item 6a or 6b |
| | SURRENT RECORD INFORMATION: Complete for Party Information 6a. ORGANIZATION'S NAME | ii Charige - provi e bi | ily <u>one</u> flame (da bi ob) | | | |
| OR | 6b. INDIVIDUAL'S SURNAME | FIRST PERS | ONAL PAM | ADDITIO | DNAL NAME(S)/INITIAL(S) | SUFFIX |
| 7. C | HANCED OF ADDED INFORMATION: Complete for Assistances or Both | | | | | |
| _ | HANGED OR ADDED INFORMATION: Complete for Assignment or Party | Information Change - provi | de only <u>one</u> name (7° 5, 7b) (use exa | act, full name; do not o | mit, modify, or abbreviate any pa | rt of the Debtor's name) |
| | 7a. ORGANIZATION'S NAME DEUTSCHE BANK TRUST COMPANY AMER | | | act, full name; do not o | mit, modify, or abbreviate any pa | rt of the Debtor's name) |
| | 7a. ORGANIZATION'S NAME | | | act, full name; do not o | mit, modify, or abbreviate any pa | rt of the Debtor's name) |
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| | 7a. ORGANIZATION'S NAME DEUTSCHE BANK TRUST COMPANY AMER 7b. INDIVIDUAL'S SURNAME | | | act, full name; do not o | mit, modify, or abbreviate any pa | t of the Debtor's name) |
| OR | 7a. ORGANIZATION'S NAME DEUTSCHE BANK TRUST COMPANY AMES 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME | | | STATE | POSTAL GODE | SUFFIX |
| OR 7c. | 7a. ORGANIZATION'S NAME DEUTSCHE BANK TRUST COMPANY AMES 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | RICAS, AS TF | RUSTEE* | C/A | 0,5,5, | SUFFIX |
| OR 7c. | 7a. ORGANIZATION'S NAME DEUTSCHE BANK TRUST COMPANY AMES 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 61 East St. Andrew Place COLLATERAL CHANGE: Also check one of these four boxes: | CITY | RUSTEE* | STATE CA | POSTAL GODE | SUFFIX |
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1613339047 Page: 2 of 3

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| UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS | T ADDENDUM | | |
|---|--|--|-------------------|
| 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on An 1601317020 filed 1/13/16 | nendment form | | |
| 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on | Amendment form | | |
| 12a ORGANIZATION'S NAME FEDERAL HOME LOAN MORTGAGE CORPORAT | | | |
| OR | | | |
| 12b, INDIVIDUAL'S SURNAME | | | |
| FIRST PERSONAL NAME | | | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | HE ABOVE SPACE IS FOR FILING OFFICE U | JSE ONLY |
| 13. Name of DEBTOR on related financing statem and (Name of a current Debto one Debtor name (13a or 13b) (use exact, full name; du not omit, modify, or abbrev | or of record required for indexing purp viate any part of the Debtor's name); | oses only in some filing offices - see Instruction item see Instructions if name does not fit | 13): Provide only |
| 13a. ORGANIZATION'S NAME SO HOLDINGS GK, LLC | | | |
| OR 13b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): | | | |
| | Olysia. | Co | |
| 15. This FINANCING STATEMENT AMENDMENT: ☐ covers timber to be cut ☐ covers as-extracted collateral ✓ is filed as 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): | Exhibit "A", a Commonly k | property more specifically describ ttached hereto and made a part h | |
| 18. MISCELLANEOUS: | 2300 N ROLL | au 7 (vonuo, Onicago, IL 0004) | |

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EXHIBIT A

DESCRIPTION OF THE LAND

LOTS 21, 22, AND 23 IN BLOCK 14 IN PAULING'S BELMONT AVENUE ADDITION TO CHICAGO IN THE EAST 1/2 OF THE NORTHWEST 1/4 OF SECTION 27, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN

Inown as.

Cook Collings Clerk's Office Tax Parcel Number: 13-27-118-019-1001 through 13-27-118-019-1048, both inclusive

Commorly known as: 2900 N Kolmar Avenue, Chicago, IL 60641