UNOFFICIAL COPY

PROVIDENCE BANK & TRUST P.O. BOX 706 SOUTH HOM. AND, IL. 60473 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE INVISER INITIAL FINANCING STATEMENT FILE INVISER INITIAL FINANCING STATEMENT FILE INVISER IT FERMINATION. Effectiveness of the Finan fing Statement Identified above is terminated with respect to the security interestity of Secured Party sutherizing this Termination Statement ASSIGNMENT from containing the provide Debtor's name in identified above is terminated with respect to the security interestity of Secured Party sutherizing this Termination Statement ASSIGNMENT from containing the provide Debtor's name in identified above in terminated with respect to the security interestity of Secured Party sutherizing this Termination Statement in termination of the additional primary provide by applicable termination of the additional primary provides by applicable termination of the security interestity of Secured Party submortaing this Continuation Statement is continued for the additional primary provides by applicable termination of the security interestity of Secured Party submortaing this Continuation Statement is continued for the additional primary provides by applicable termination of the security interestity of Secured Party submortaing this Continuation Change in the additional primary provides and the primary provides and the security interestity of Secured Party submortaing this Continuation Change in the security interestity of Secured Party submortaing this Continuation Change in the security interestity of Secured Party submortaing this Continuation Change interestity of Secured Party submortaing t				
NAME & POONE OF CONTACT AT FILER (optional) E-MAIL CONTACT AT FILER (optional) E-MAIL CONTACT AT FILER (optional) E-MAIL CONTACT AT FILER (optional) SEND ACKNOWLEDGMENT TO: (Name and Address) PROVIDENCE BANK & TRUST P.O. BOX 706 SOUTH HOLL, AND, II. 60473 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INTER SPACE IS FOR FILING OFFICE USE ONLY INTER CONTINUE OF THE REVUISIER 222.05.33.173 08/13/2012 TERMINATION: Effectiveness of the Fire/pling Statement Identified above is terminated with respect to the security interestly of Secured Party authorizing this Termination Statement ASSIGNMENT fluir or partial. Poorties man of Additional and Party of the Additional Party authorizing this Termination on the Additional Party and additional provided by applicable see. CONTINUENTON: Effectiveness of the Fire/pling Statement is emitted of collected in the recent of the Additional provided by applicable see. CONTINUENTON: Effectiveness of the Fire/pling Statement is emitted of collected in the Additional Party authorizing this Termination Ontollected for the additional provided by applicable see. CONTINUENTON: Effectiveness of the Fire/pling Statement is emitted of collected in the Security interestly) of Secured Party authorizing this Termination Ontollected for the additional provided by applicable see. CONTINUENTON: Effectiveness of the Fire/pling Statement is emitted and other security interestly) of Secured Party authorizing this Termination Ontollected for the additional provided by applicable see. CONTINUENTON: Effectiveness of the Fire francing Statement is emitted and the security interestly) of Secured Party authorizing this Termination Ontollected for the additional provided by applicable see. CONTINUENTON: Effectiveness of the Fire francing Statement is emitted and the security interestly) of Secured Party authorizing this Continuent is emitted. CONTINUENTON: Effectiveness of the Fire francing Statement is emitted to the security interestly) of Secured Party authorizing this Termination Conti		IENT	RHSP FEE:\$9.00 RPR	006136*"""""""""""""""""""""""""""""""""""
SEND ACKNOWLEDGMENT TO: (Name and Address) PROVIDENCE BANK & TRUST P.O. BOX 766 SOUTH HOV. AND, II. 60473 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FRANCING STATEWERT FLIS (INDER 222633173 08/13/2012 TERMINATION: Strictwers of the Final Ing Statement identified above is learningted with respect to the security interest(s) of Secured Party subhitring this Termination Stretment For parcial assignment, complete lients 7 and 9 and also lone in the Transition of Value of the Final Ing Statement identified above with respect to the security interest(s) of Secured Party subhitring this Termination Stretment For parcial assignment, complete lients 7 and 9 and also lone in the Transition of Value Interest (in the Transition of Transition) ASSIGNMENT full are garded. Purply on the Final Ing Statement view of Value of Value Value Interest (in the Value of Assignor) in the B For parcial assignment, complete lients 7 and 9 and also lone in the Value of Value of Value Interest (in the Value of Assignor) in the B For parcial assignment, complete lients of Value of Value Interest (in the Value of Assignor) in the B For parcial assignment, complete lients of Value of Value Interest (in the Value of Assignor) in the B For parcial assignment, complete lients of Value of Value Interest (in the Value of Assignor) in the B For parcial assignment, complete for Party interest (in the Value of Assignor) in the B For parcial assignment, complete for the Interest (in the Value of Value Interest) (in Secured Party subhitring this Enrice Interest of Assignor) in the B For parcial assignment, complete for the Value of Value of Value Interest (in 1997) of Value Interes	KIM CUNNEA 708-333-0700		COOK COUNTY RECORDS	D or
PROVIDENCE BANK & TRUST P.O. BOX 706 SOUTH HOMAND, IL 60473 Initial Financing State West File (wild a R.) Initial Financing State	.,		DATE: 03/01/2017 03	51 PM PG: 1 OF 2
INDITION INNOVINOS STATEMENT FILE (ROUSER 1222633173 08/13/2012 12	PROVIDENCE BANK & TRUST P.O. BOX 706	\neg	<u> </u>	· · · · · · · · · · · · · · · · · · ·
In	L 00		THE ADOVE SOACE IS SOO SHIMO O	EEIGE HEE ONLY
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assigner in item 9 For partial assignment, complete items 7 and 9 and also indig all received collateral in item 8 CONTRIBUATION: Effectiveness of the Financing Statement or mixed above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period by applicable law PARTY INFORMATION CHANGE: Check dag of these two boxes: AND Check dag of these two boxes: AND Check dag of these two boxes: AND Check dag of these two boxes: AND Check dag of these two boxes: AND Chec]1b.[This FINANCING STATEMENT AMENDMENT is a (or recorded) in the REAL ESTATE RECORDS	o be filed [for record]
For partial assignment, complete items 7 and 9 and also indigital expected collateral in item 8 CONTINUATION: Effectiveness of the Financing Statement win nitural above with respect to the security interest(s) of Secured Parry authorizing this Continuation Statement is continued for the additional pendog provided by applicable law continued for the additional pendog provided by applicable law Cartesian of these two boxes. AND Check aga of these two boxes. AND Check aga of these two boxes. AND Check aga of these two boxes in the financial of the pendog of these two boxes. CHANGE in the annitor address: Conglistic continued in the financial of the pendog of these for party information Change provide only one name (the or 6b). CURRENT RECORD INFORMATION: Conglete for Parry Information Change provide only one name (the or 6b). Go. GRANIZATION'S NAME GCOP PROPERTIES, LLC. 6b. INDIVIDUAL'S SURNAME INDIVIDUAL'S SURNAME INDIVIDUAL'S SURNAME INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)) CITY STATE POSTAL CUCS COUNTRY COLLATERAL CHANGE: Also check aga of these four boxes: ADD colleteral DELETE collateral RESTATE covered colleteral ASSIGN collisteral indicate collateral CE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (to or 6b) (name of Assignor, if this is an Assignment) this is an Amendmant authorized by a DEBTOR, check here and provide name of authorizing Debtor AME OF SECURED BANK & TRUST	▼ TERMINATION: Effectiveness of the Finan ing Statement identifies Statement **Termination** **Termi	ed above is terminated with r	espect to the security interest(s) of Secured Party at	uthorizing this Termination
PARTY INFORMATION CHANGE: AND Check age of these two boxes: AND Check age of these two address: Complete item 75 or 75, and item 7c AND name: Complete item 76 or 75, and item 7c AND name: Complete item 76 or 76, and item 7c 77 or 76, and item 7c AND INDIVIDUAL'S SURNAME FIRST PERSONAL NAME: ANDITIONAL NAME(SJINITIAL(S) SUFFIX ANDITIONAL NAME(SJINITIAL(S) SUFFIX STATE POSTAL COCC. COUNTRY COUNTRY STATE POSTAL COCC. COUNTRY ANDITIONAL NAME(SJINITIAL(S) SUFFIX STATE POSTAL COCC. COUNTRY ANDITIONAL NAME(SJINITIAL(S			ignee in item 7c and name of Assignor in item 9	
AND Check org of these two boxes: AND Check org org org org org org org of these two boxes: AND Check org	CONTINUATION: Effectiveness of the Financing Statement of nul continued for the additional period provided by applicable law	in ad above with respect to the	ne security interest(s) of Secured Party authorizing the	is Continuation Statement is
HANNEE OR CARDED INFORMATION: Complete for Party Information Charge - provide only one name (8a or 6b) G. ORGANIZATIONS NAME GCD PROPERTIES, LLC 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIR	PARTY INFORMATION CHANGE:			·
CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only gige name (6a or 6b) 6a ORGANIZATION'S NAME GCD PROPERTIES, LLC 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME INDIVIDUAL'S SURNAME INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYMNITIAL(S) COLLATERAL CHANGE: Also check ging of these four boxes: ADD colleteral DELETE collateral RESTATE covered collisteral ASSIGN collateral Indicate collateral; E EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only ging name (9a or 9b) (name of Assignor, if this is an Assignment) gins is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Oebtor 9a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST	THEOR DITE OF BIESE TWO BOXES.	CHANGE or ne and for addre	ss: Complete ADD name: Complete item DI	ELETE name: Give record name
GCD PROPERTIES, LLC 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(SJINITIAL(S) SUFFIX TALL ORGANIZATION'S NAME TO. INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SJINITIAL(S) SUFFIX MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY ASSIGN collateral Indicate collateral: E EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only grg name (9a or 9b) (name of Assignor, if this is an Assignment) SIGNAMIZATION'S NAME PROVIDENCE BANK & TRUST FIRST PERSONAL NAME (SUPPLIED AND MADE A PART HEREOF FIRST PERSONAL NAME (SUPPLIED AND MADE A PART HEREOF) AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only grg name (9a or 9b) (name of Assignor, if this is an Assignment) SIGNAMIZATION'S NAME PROVIDENCE BANK & TRUST				be deleted in item 6a or 6b
ED. INDIVIDUAL'S SURNAME FIRST PERSONAL NATION FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME FINDIVIDUAL'S SURNAME INDIVIDUAL'S ADDITIONAL NAME(SJINITIAL(S) GOUNTRY GOULATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral: E EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF FIRST PERSONAL NAME FIRST PERSONAL NAME COUNTRY STATE POSTAL CUPS COUNTRY COUNTRY FOR AND POSTAL CUPS COUNTRY FOR AND MADE A PART HEREOF FIRST PERSONAL NAME (9a or 9b) (name of Assignor, if this is an Assignment) STATE POSTAL CUPS COUNTRY AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) STATE POSTAL CUPS COUNTRY FIRST PERSONAL NAME PROVIDENCE BANK & TRUST		4	<u></u>	
To. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) CITY STATE POSTAL CODE COUNTRY COLLATERAL CHANGE: Also check one of these four boxes: ADD collisteral DELETE collisteral RESTATE covered collisteral ASSIGN collisteral Indicate collisteral: EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF SIAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST	i '	FIRST PERSONAL N	AY (E ADDITIONAL NAME(S).	INITIAL(S) SUFFIX
To. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) CITY STATE POSTAL CODE COUNTRY COLLATERAL CHANGE: Also check one of these four boxes: ADD collisteral DELETE collisteral RESTATE covered collisteral ASSIGN collisteral Indicate collisteral: EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF SIAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party	Information Change - provide only or	e name (7a or 7h) /use ex chi full name: do not omit modify or abb	Avieta any cart of the Dahlor's came)
INDIVIDUAL'S ADDITIONAL NAME (SYINITIAL(S) MAILING ADDRESS CITY STATE POSTAL CUP: COUNTRY COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral: EE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF IAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor PROVIDENCE BANK & TRUST		Mind Manage - provide only vi	Ename (va or b) (use e such that make, no not only, moonly, or about	eviate any part of the Deption 5 failie)
INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S) MAILING ADDRESS CITY STATE POSTAL COD: COUNTRY COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral Indicate collateral: EE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF SAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST	7b. INDIVIDUAL'S SURNAME			***
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S) MAILING ADDRESS CITY STATE POSTAL COD: COUNTRY COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral Indicate collateral: EXAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) STATE POSTAL COD: COUNTRY ASSIGN collateral COUNTRY COUNTRY ASSIGN collateral COUNTRY ASSIGN collateral COUNTRY ASSIGN collateral COUNTRY COUNTRY ASSIGN collateral COUNTRY COUNTRY COUNTRY COUNTRY ASSIGN collateral COUNTRY ASSIGN collateral COUNTRY COUNTRY ASSIGN collateral COUNTRY COUNTRY COUNTRY COUNTRY ASSIGN collateral COUNTRY COUNTRY COUNTRY COUNTRY COUNTRY COUNTRY COUNTRY COUNTRY ASSIGN collateral COUNTRY COUNTRY COUNTRY COUNTRY COUNTRY ASSIGN collateral COUNTRY COUNT			0,1	
COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral: E EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor PROVIDENCE BANK & TRUST	INDIVIDUAL'S FIRST PERSONAL NAME			
AALLING ADDRESS CITY STATE POSTAL CODE COUNTRY COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral Indicate collateral: E EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) This is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor PROVIDENCE BANK & TRUST COUNTRY ASSIGN collateral ASSIGN collateral ASSIGN collateral ASSIGN collateral ASSIGN collateral ASSIGN collateral SCANIE OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) SCANIE OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) SCANIE OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) SCANIE OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) SCANIE OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) SCANIE OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) SCANIE OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)				
COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral: E EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST				ISUFFIX
Indicate collateral: E EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF S IAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST				SUFFIX
Indicate collateral: E EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF S AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	CITY	STATE POSTAL CUI	
AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor PROVIDENCE BANK & TRUST	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS			COUNTRY
this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes:			COUNTRY
this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collateral D	ELETE collateral RESTATE covered collater	COUNTRY
this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collateral D	ELETE collateral RESTATE covered collater	COUNTRY
this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collateral D	ELETE collateral RESTATE covered collater	COUNTRY
this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME PROVIDENCE BANK & TRUST	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collateral D	ELETE collateral RESTATE covered collater	COUNTRY
PROVIDENCE BANK & TRUST	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collateral D	ELETE collateral RESTATE covered collater	COUNTRY
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: E EXHIBIT "A" ATTACHED HERETO AND I	ADD collateral D	ELETE collateral RESTATE covered collater EREOF only one name (9a or 9b) (name of Assignor, if this is	an Assignment)
Superior (Amelo) (Superior (Amelo))	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: E EXHIBIT "A" ATTACHED HERETO AND INTERPRETATION AND INTERPRETATI	ADD collateral D	ELETE collateral RESTATE covered collater EREOF only one name (9a or 9b) (name of Assignor, if this is	COUNTRY al ASSIGN collateral
1 1 1 2 3 3	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: CE EXHIBIT "A" ATTACHED HERETO AND INTERPRETATION INTERPRE	ADD collateral D	ELETE collateral RESTATE covered collater EREOF only one name (9a or 9b) (name of Assignor, if this is	al ASSIGN collateral S an Assignment)

1706006136 Page: 2 of 2



Exhibit "A"

UNIT 1 TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN COMMON ELEMENTS IN 6348 SOUTH GREENWOOD CONDOMINIUM AS DELINEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT NUMBER 0531845026, AS AMENDED, IN THE NORTHWEST 1/4 OF SECTION 23, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

P.I.N.: 20-23-1/6-082-1001

A/K/A 6348 SOUTH GPEENWOOD AVENUE, CHICAGO, ILLINOIS 60637

ALL ACCOUNTS AND CONTRACT RIGHTS; CHATTEL PAPER; DEPOSIT ACCOUNTS; DOCUMENTS; EQUIPMENT; FIXTURES; GENERAL INTANGIBLES; INSTRUMENTS; INVENTORY; INVESTMENT PLOFERTY;