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UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-	5294
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
1280 83988	
Corporation Service Company	·
801 Adlai Stevenson Drive	
Springfield, IL 6270?	Filed In: Illinois
	(Cook)

Ooc# 1706610172 Fee \$42.00

₹HSP FEE:\$9.00 RPRF FEE: \$1.00

(AREN A.YARBROUGH

COOK COUNTY RECORDER OF DEEDS

SPRFilling@cscinfo.com)ATE: 03/07/2	2017 03:38 PM	PG: 1 0F 3
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
1280 83988	\neg			-	
Corporation Service Company	ı				
801 Adlai Stevenson Drive					
Springfield, IL 62702	Filed In: Illinois				
	(Cook)		,		
		THE AB	OVE SPACE IS FOR FIL	ING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 1216310101 06/11/2012		(or recorded) i	1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Filer, attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13		
 TERMINATION: Effectiveness of the Filliancing Statement identification. 	ed above is terminated	with respect to the sec	urity interest(s) of Secured I	Party authorizing this	s Termination
3. ASSIGNMENT (full or partial): Provide name of Assignment item For partial assignment, complete items 7 and 9 and itso not cate af			and name of Assignor in iten	n 9	
CONTINUATION: Effectiveness of the Financing Statemen' iden continued for the additional period provided by applicable law.	(fied above with respec	ct to the security interes	it(s) of Secured Party autho	rizing this Continuati	ion Statement is
5. PARTY INFORMATION CHANGE:					
Check one of these two boxes: AND Ch	necl one of hese three b		400	05) 575	
This Change affects Debtor or Secured Party of record	CHAN's name and/or item 6a (r 6b; and item	7a or 7b <u>and</u> item 7c	ADD name: Complete item 7a or 7b, <u>and</u> item 7c	DELETE name: to be deleted in	Give record name item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information	on Change - provide or ly	one name (6a or 6b)			
6a. ORGANIZATION'S NAME),			
OR ON INDIVIDUALIS SUBMANE		<u></u>			
OD. INDIVIDUAL'S SURNAME	FIRST PERSO		ADDITIONAL N	AME(S)/INITIAL(S)	SUFFIX
CIEPIELA	EDWARI			 .	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part	y Information Change - provide	only one nama (/a or 7b) (ne	exact, full name; do not omit, modi	ify, or abbreviate any part	of the Debtor's name)
7a. ORGANIZATION'S NAME			<u>/</u>		
7b. INDIVIDUAL'S SURNAME			C/2.		
INDIVIDUAL'S FIRST PERSONAL NAME			-7		
			0,		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S))	SUFFIX
				Sc.	
7c. MAILING ADDRESS	CITY		STATE POST	TALLODE	COUNTRY
				Co	USA
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE covered	rollateral	ASSIGN collecteral
Indicate collateral:					
			,	. 5	
				D	13
				٣	
				C	
				•	
·				କ	C
NAME OF SECURED BARTY OF BECORD AUTHORIZING	THE AMENDMENT	Describba e el el el	00-1		192 / /
 NAME of SECURED PARTY of RECORD AUTHORIZING T If this is an Amendment authorized by a DEBTOR, check here ☐ and p 	HIS AMENUMENT: provide name of authoriz		9a or 9b) (name of Assignor,	if this is an Assignm	NI LLA
9a. ORGANIZATION'S NAMEPNC Bank, National Assoc					-
1 140 Bank, Hadonai Assoc	I WATER				
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIONAL N	AME(S)/INITIAL(S)	SUFFIX
				-,-,,-,	[
L 10. OPTIONAL FILER REFERENCE DATA Debtor: FDWARD	OIEDIELA CA	II # 0000E0			

1280 83988

1706610172 Page: 2 of 3

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FOLLOW INSTRUCTIONS				
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on A 1216310101 06/11/2012	mendment form			
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 or	n Amendment form			
12a. ORGANIZATION'S NAME PNC Bank, National Association				
OR 12b. INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME				
ADDITIONAL NAME(\$)/INI(5)	SUFFIX			
		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY		
 Name of DEBTOR on related financing slates ent (Name of a current Debione Debtor name (13a or 13b) (use exact, full name, do not omit, modify, or abbre 			13): Provide onl	
13a. ORGANIZATION'S NAME				
OR 13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL MANEGOVINITIAL (5)	lousely	
CIEPIELA	EDWARD	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2 EAST BROOKWOOD DRIVE ARLINGTON HEIGHTS, IL 60004 ELIZABETH CIEPIELA 2 EAST BROOKWOOD DRIVE ARLINGTON HEIGHTS, IL 60004	17. Description of re			
	s a fixture filing See Exhibit			

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EXHIBIT "A"

Order ID: 708587

LEGAL DESCRIPTION

Parcel number 16-11-107-035-0000

The following described Real Estate situated in the County of Cook in the State of Illinois, to wit:

Lot 5 in Matthiessen; Subdivision of Lots 18, 19, 20, 21, 22 and 23 in McAuley,s Subdivision of Block 1 in Morton,s Subdivision of the East 1/2 of the Northwest 1/2 of Section 11, Township 39 North, Range 13, East of the Third Principal Meridian, in Cook County Illinois ements an analysis of Columnia Calents Office

Subject to any restrictions, easements and/or adverses that pertain to this property.