UNOFFICIAL COPY

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@wolte	rskluwer.com \
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	17956 - RED
CT Lien Solutions	57807828
P.O. Box 29071 Glendale, CA 91209-9071	ILIL
	FIXTURE
File with Cook II	



A. NAME & PHONE OF CONTACT AT FILER (optional Phone: (800) 331-3282 Fax: (818) 662-4141		Poc# 1706939147 Fee \$42.00
B. E-MAIL CONTACT AT FILER (optional)		RHSP FEE:\$9.00 RPRF FEE: \$1.00
CLS-CTLS_Glendale_Customer_Service@v	volterskluwer.com \	KAREN A.YARBROUGH
C. SEND ACKNOWLEDGMENT TO: (Name and Addre	ess) 17956 - RED	COOK COUNTY RECORDER OF BEEDS
CT Lien Solutions P.O. Box 29071	57807828	DATE: 03/10/2017 02:08 PM PG: 1 OF 3
Glendale, CA 91209-9071	ILIL	<u> </u>
	FIXTURE 1	
Filewith Cook II	, ,,,,,,,,	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
File with Cook, IL a. INITIAL FINANCING STATEMENT THE NUMBER		1b. This Financing STATEMENT AMENDMENT is to be filed for record;
1215734079 6/5/2012 CC IL Cook		(or recorded) in the REAL ESTATE RECORDS Filer. attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13
P. TERMINATION: Effectiveness of the Financi' g S' .(ef Statement	ment identified above is terminated wit	h respect to the security interest(s) of Secured Party authorizing this Termination
ASSIGNMENT (full or partial): Provide name of Assignment, complete items 7 and 9 and a		
CONTINUATION: Effectiveness of the Financing State continued for the additional period provided by applications.		the security interest(s) of Secured Party authorizing this Continuation Statement is
5. PARTY INFORMATION CHANGE:	0	
Check one of these two boxes:	AND Check ove of thise three bo	
This Change affects Debtor or Secured Party of rec		
 CURRENT RÉCORD INFORMATION: Complete for Party 6a. ORGANIZATION'S NAME 	Information Change - provide only on	e name (6a or 6b)
2620 WASHINGTON LMASTER TENA	NT, LLC	<i>U</i> .
OR 66. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL N. ME ADDITIONAL NAME(SVINITIAL(S) SUFFIX
1		
7. CHANGED OR ADDED INFORMATION: Complete for Assign	ment or Party Information Change - provide only	one name (7a or 7b): (r a exa. 1, full name; do not omit, modify, or abbreviate any part of the Debtor's name)
	ment or Party Information Change - provide only	
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME	ment or Party Information Change - provide only	
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME	ment or Party Information Change - provide only	
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME	ment or Party Information Change - provide only	
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME	ment or Party Information Change - provide only	
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME	ment or Party Information Change - provide only	one name (7a or 7b): (v a exa. 1, full name; do not omit, modify, or abbreviate any part of the Debtor's name)
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME	ment or Party Information Change - provide only	one name (7a or 7b): (v a exa. 1, full name; do not omit, modify, or abbreviate any part of the Debtor's name)
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)) 7c. MAILING ADDRESS	СПУ	one name (7a or 7b). (v. a exa. 1, full name; do not omit, modify, or abbreviate any part of the Debtor's name) SUFFIX STATE POSTAL ODE COUNTRY
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)) 7c. MAILING ADDRESS	СПУ	one name (7a or 7b)-(v. a exa.). full name; do not omit, modify, or abbreviate any part of the Debtor's name) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Also check one of these	СПУ	one name (7a or 7b). (v. a exa. 1, full name; do not omit, modify, or abbreviate any part of the Debtor's name) SUFFIX STATE POSTAL ODE COUNTRY
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Also check one of these	СПУ	one name (7a or 7b). (v. a exa. 1, full name; do not omit, modify, or abbreviate any part of the Debtor's name) SUFFIX STATE POSTAL ODE COUNTRY
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Also check one of these	СПУ	one name (7a or 7b). (v. a exa. 1, full name; do not omit, modify, or abbreviate any part of the Debtor's name) SUFFIX STATE POSTAL ODE COUNTRY
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Also check one of these	СПУ	one name (7a or 7b). (v. a exa. 1, full name; do not omit, modify, or abbreviate any part of the Debtor's name) SUFFIX STATE POSTAL ODE COUNTRY
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)) 7c. MAILING ADDRESS 3. COLLATERAL CHANGE: Also check one of these	СПУ	one name (7a or 7b). (v. a exa. 1, full name; do not omit, modify, or abbreviate any part of the Debtor's name) SUFFIX STATE POSTAL ODE COUNTRY
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)) 7c. MAILING ADDRESS 3. COLLATERAL CHANGE: Also check one of these Indicate collateral:	CITY e four boxes: ADD collateral	one name (7a or 7b) (ir a exist). All name; do not omit, modify, or abbreviate any part of the Debtor's name) SUFFIX STATE POSTAL ODE COUNTRY DELETE coltateral RESTATE covered collateral ASSIGN collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Also check one of these Indicate collateral:	e four boxes: ADD collateral	one name (7a or 7b) (it a exist). All name; do not omit, modify, or abbreviate any part of the Debtor's name) SUFFIX STATE POSTAL ODE COUNTRY DELETE collateral RESTATE covered collateral ASSIGN collateral rovide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Also check one of these Indicate collateral:	e four boxes: ADD collateral	one name (7a or 7b) (it a exist). All name; do not omit, modify, or abbreviate any part of the Debtor's name) SUFFIX STATE POSTAL ODE COUNTRY DELETE collateral RESTATE covered collateral ASSIGN collateral rovide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Also check one of these Indicate collateral: 9. NAME OF SECURED PARTY OF RECORD AUTH If this is an Amendment authorized by a DEBTOR, check he SECRETARY OF HOUSING AND URE	e four boxes: ADD collateral HORIZING THIS AMENDMENT: Pere and provide name of authorize	one name (7a or 7b) (it a exist). All name; do not omit, modify, or abbreviate any part of the Debtor's name) SUFFIX STATE POSTAL ODE COUNTRY DELETE collateral RESTATE covered collateral ASSIGN collateral rovide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
7. CHANGED OR ADDED INFORMATION: Complete for Assign 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S) 7c. MAILING ADDRESS 3. COLLATERAL CHANGE: Also check one of these Indicate collateral: 15 Indicate collateral: 16 Indicate of SECURED PARTY of RECORD AUTH 17 If this is an Amendment authorized by a DEBTOR, check he 18 ORGANIZATION'S NAME	e four boxes: ADD collateral HORIZING THIS AMENDMENT: Pere and provide name of authorize	STATE POSTAL ODE COUNTRY DELETE coltateral RESTATE covered collateral ASSIGN collateral covide only one name (9a or 9b) (name of Assignor, if this is an Assignment)

Prepared by CT-Lien Solutions, P.O. Box 29071, w Glendale, CA 91209-9071 Tel (800) 331-3282

180005649

GINNIE MAE

57807828

1706939147 Page: 2 of 3

UNOFFICIAL COPY

215734079 - 6(5/2012 CC IL Cook 2. NAME OF PRATY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form Tax ORGANIZATO'S NAME	JCC FINANCING STATEMENT AMENDMENT ADDEND FOLLOW INSTRUCTIONS	
2. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Tab GRAMAZYONS NAME	1. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 215734079 6/5/2012 CC IL Cook	
SECRETARY OF HOUSING AND URBAN DEVELOPMENT T15. INDIVIDUAL'S SURVAME FIRST PERSONAL NAME	12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form	
R 122. INGNITOWAL SOURNAME FIRST PERSONAL NAME ADDITIONAL NAME SYNTRAL(S) 3. Name of DEBTOR on related if famoing statement (1 some of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction Item 13): Provides the Debtor name of the Debtor's name); see Instructions if name does not fit 13b. ORGANIZATION'S NAME 2620 WASHINGTON LIMASTER TENANT, L! © R 13b. NONITIONAL SPACE FOR ITEM 8 (Collaters): EDEBTOR on related if famoing statement (2 so or 13b) (use exact, full raily size, join of ornit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit 13b. NONITIONAL SPACE FOR ITEM 8 (Collaters): EDEBTOR OR ADDITIONAL SPACE FOR ITEM 8 (COLLATER)		
FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) 3. Name of DEBTOR on related financing statistics. (Plume of a current Debtor of record required for indexing purposes only in some filting offices - see Instruction Item 13): Provide- gene Debtor name (13 as or 13b) (use exact, full ray is, is not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit 13a. ORGANIZATIONS NAME 2620 WASHINGTON LIMASTER TENAN T. J. C 13b. ORGANIZATIONS NAME 27b. DEBTOR ORGANIZATIONS NAME 27c. DEBTOR ORGANIZAT	OR - AND MIDDIALIS SUPMANS	**
ADDITIONAL NAME (S)NNTIAL(S). THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 3. Name of DEBTOR on related financing statistics (C) plane of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction Item 13). Provide- one Debtor name (13a or 13b) (use exact, full name, iso not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit 13a. ORGANIZATIONS NAME 2620 WASHINGTON LMASTER TENANT L.! © 13b. INDIVIDUAL'S SURIAME ADDITIONAL SPACE FOR ITEM 8 (Collateral); ebtor Name and Address: 2620 WASHINGTON LMASTER TENANT, LLC - 2620 W. WASHING ON BLVD CHICAGO, IL 50612 ecured Party Name and Address: ECRETARY OF HOUSING AND URBAN DEVELOPMENT - 77 WEST JACKSON BOULEVARD , CHICAGO, IL 60604 ED MORTGAGE CAPITAL, LLC - 1717 MAIN STREET, SUITE 900 , DALLAG, TX 75201 RED MORTGAGE CAPITAL, LLC 5. This FINANCING STATEMENT AMENDMENT: Covers timber to be out	125. INDIVIDUAL 5 SURNAME	
3. Name of DEBTOR on related financing statement (Plane of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13). Provide- one Debtor name (13a or 13b) (use exact, full name; jo not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit 13a. ORGANIZATION'S NAME 2620 WASHINGTON LMASTER TENANT_LIS 13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYNNITIAL(S)) SUFFIX 4. ADDITIONAL SPACE FOR ITEM 8 (Collistera)); ebtor Name and Address: ECOVERTARY OF HOUSING AND URBAND DEVELOPMENT - 77 WEST JACK'SC N BOULEVARD, CHICAGO, IL 60604 ED MORTGAGE CAPITAL, LLC - 1717 MAIN STREET, SUITE 900 , DALLAS, TO 75201 9. This FINANCING STATEMENT AMENDMENT: Overs timber to be out Covers as-extracted collateral State State State State		SHEEN
one Debtor name (13a or 13b) (use exact, full name, so not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not ft 13a, ORGANIZATION'S NAME 2620 WASHINGTON LMASTER TENANT, L! S 13b, INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINITIAL(S) SUPPIX 4. ADDITIONAL SPACE FOR ITEM 8 (Collateral); ebtor Name and Address: 820 WASHINGTON LMASTER TENANT, LLC - 2620 W, WASHING ON BLVD., CHICAGO, IL 60612 820 WASHINGTON LMASTER TENANT, LLC - 2620 W, WASHING ON BLVD., CHICAGO, IL 60612 820 ECRETARY OF HOUSING AND URBAN DEVELOPMENT - 77 WEST JACKSON BOULEVARD., CHICAGO, IL 60604 821 ECRETARY OF HOUSING AND URBAN DEVELOPMENT - 87 WEST JACKSON BOULEVARD., CHICAGO, IL 60604 822 ECRETARY OF HOUSING AND URBAN DEVELOPMENT - 87 WEST JACKSON BOULEVARD., CHICAGO, IL 60604 823 ECRETARY OF HOUSING AND URBAN DEVELOPMENT - 77 WEST JACKSON BOULEVARD., CHICAGO, IL 60604 824 ED MORTGAGE CAPITAL, LLC - 1717 MAIN STREET, SUITE 900., DALLAC, FN 75201 825 PART OF THE STREET	200	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
2620 WASHINGTON LMASTER TENAN T. L. © Rest personal name Additional name(symitial(s)) Suffice 29	one Debtor name (13a or 13b) (use exact, full nar ie; io not omit, modify, or abbreviate any page 1	d for indexing purposes only in some filing offices - see Instruction item 13): Provide onl art of the Debtor's name); see Instructions if name does not fit
4. ADDITIONAL SPACE FOR ITEM 8 (Collateral): ebtor Name and Address: 620 WASHINGTON LMASTER TENANT, LLC - 2620 W. WASHING ON BLVD. , CHICAGO, IL 60612 ecurred Party Name and Address: ECRETARY OF HOUSING AND URBAN DEVELOPMENT - 77 WEST JACKSON BOULEVARD , CHICAGO, IL 60604 ED MORTGAGE CAPITAL, LLC - 1717 MAIN STREET, SUITE 900 , DALLAS, TX 75201) RED MORTGAGE CAPITAL, LLC 5. This FINANCING STATEMENT AMENDMENT: covers timber to be cut	2620 WASHINGTON LMASTER TENAN T! C	
ecured Party Name and Address: 620 WASHINGTON LMASTER TENANT, LLC - 2620 W. WASHING ON BLVD., CHICAGO, IL 60612 ecured Party Name and Address: ECRETARY OF HOUSING AND URBAN DEVELOPMENT - 77 WEST JACK SCN BOULEVARD, CHICAGO, IL 60604 ED MORTGAGE CAPITAL, LLC - 1717 MAIN STREET, SUITE 900, DALLAS, TN 75201 PRED MORTGAGE CAPITAL, LLC 5. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut Covers as-extracted collateral is filed as a fixture filing 6. Name and address of a RECORD OWNER of real estate described in item 17 (If Debtor does not have a record interest): Parcel ID:	13b, INDIVIDUAL'S SURNAME FIRST PERSO	NAL NAME ADDITIONAL NAME(SYINITIAL(S) SUFFIX
ECRETARY OF HOUSING AND URBAN DEVELOPMENT - 77 WEST JACKSON BOULEVARD , CHICAGO, IL 60604 ED MORTGAGE CAPITAL, LLC - 1717 MAIN STREET, SUITE 900 , DALLAC, DX 75201 7. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut Covers as-extracted collateral In filed as a fixture filling of the covers	14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): Debtor Name and Address:	
ECRETARY OF HOUSING AND URBAN DEVELOPMENT - 77 WEST JACK SCN BOULEVARD, CHICAGO, IL 60604 ED MORTGAGE CAPITAL, LLC - 1717 MAIN STREET, SUITE 900 , DALLAS, C. 75201 RED MORTGAGE CAPITAL, LLC 5. This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted collateral is filed as a fixture filing of the covers and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Parcel ID:	2620 WASHINGTON LMASTER TENANT, LLC - 2620 W. WASHING ON BLVI	D. , CHICAGO, IL 60612
5. This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted collateral is filed as a fixture filing 6. Name and address of a RECORD OWNER of real estate described in item 17 (if Deblor does not have a record interest): Parcel ID:	Secured Party Name and Address: SECRETARY OF HOUSING AND URBAN DEVELOPMENT - 77 WEST JACKS RED MORTGAGE CAPITAL LLC - 1717 MAIN STREET, SUITE 900 . DALLAS	4: A ===== :
5. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut Covers as-extracted collateral is filed as a fixture filling 6. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Covers timber to be cut Covers as-extracted collateral Covers as-		40*
5. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut Covers as-extracted collateral is filed as a fixture filling 6. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Covers timber to be cut Covers as-extracted collateral Covers as-		9
5. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut Covers as-extracted collateral is filed as a fixture filling 6. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Covers timber to be cut Covers as-extracted collateral Covers as-		C/
5. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut Covers as-extracted collateral is filed as a fixture filling 6. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Covers timber to be cut Covers as-extracted collateral Covers as-		Op,
5. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut Covers as-extracted collateral is filed as a fixture filling 6. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Covers timber to be cut Covers as-extracted collateral Covers as-		7.6
5. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut Covers as-extracted collateral is filed as a fixture filling 6. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Covers timber to be cut Covers as-extracted collateral Covers as-		0.
5. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut Covers as-extracted collateral is filed as a fixture filing 6. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Covers timber to be cut Covers as-extracted collateral Si is filed as a fixture filing in the filing Parcel ID:		Visc.
5. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut Covers as-extracted collateral is filed as a fixture filing 6. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Covers timber to be cut Covers as-extracted collateral Si is filed as a fixture filing in the filing Parcel ID:		
covers timber to be cut covers as-extracted collateral is filled as a fixture filling 6. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Parcel ID:		C ⁰
6. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Parcel ID:	15. This FINANCING STATEMENT AMENDMENT:	17. Description of real estate:
Parcel ID:	16. Name and address of a RECORD OWNER of real estate described in item 17	┧.
	(if Deblor does not have a record interest):	
16-12-419-001-0000		
		16-12-419-001-0000
		•

UNOFFICIAL COPY

Debtor: 2620 Washington Master Tenant, LLC, an Illinois limited liability company

EXHIBIT A

LEGAL DESCRIPTION

THAT PART OF LOT 2 IN THE PARTITION BY MAURICE WAKEMAN AND OTHERS OF THE SOUTH % OF THE SOUTHEAST % OF SECTION 12, TOWNSHIP 39 NORTH RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, DESCRIBED AS FOLLOWS:

BEGINNING AT THE POINT OF INTERSECTION OF THE NORTH LINE OF WASHINGTON BOULEVARD AS WOENED, WITH THE EAST LINE OF TALMAN AVENUE, WHICH POINT IS 25.00 FEET EAST AT RIGHT ANGLES FROM THE WEST LINE OF SAID LOT 2; THENCE EAST ALONG THE NORTH LINE OF WASHINGTON BOULEVARD, 100.00 FEET; THENCE NORTH PARALLEL WITH THE EAST LINE OF TALMAN AVENUE TO THE SOUTH LINE OF PARK AVENUE; THENCE WEST ALONG THE SOUTH LINE OF PARK AVENUE TO THE EAST LINE OF TALMAN AVENUE TO THE POINT OF BEGINNING, IN COOK COUNTY, ILLINOIS.

Sound Clark's Office

PIN: 16-12-419-001-0000 2620 Washington Blvd Chicago IL 60603

ì.