### **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)	20406 - CITIBANK
CT Lien Solutions P.O. Box 29071	58547059
Glendale, CA 91209-9071	ILIL
	FIXTURE
File with: Cook, IL	



Doc# 1711839215 Fee \$42.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 04/28/2017 01:54 PM PG: 1 OF 3

#### THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT CH. 2 TUMBER	
0622817060 BK N/A PG N/A &/13/2006 CC IL Co	οk

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record]

0622817060 BK N/A PG N/A 3/13/2006 CC IL Cook		idment Addendum (Form UCC3Ad) and provide Det	otor's name in item 13
<ol> <li>TERMINATION: Effectiveness of the Financing Statement identified Statement</li> </ol>	d above is terminated with respect to the security i	nterest(s) of Secured Party authorizing this 1	ermination
<ol> <li>ASSIGNMENT (full or partial): Provide name of Assigner in item 7a         For partial assignment, complete items 7 and 9 and all o in limits a</li> </ol>		ame of Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statement iden and continued for the additional period provided by applicable law	ed bove with respect to the security interest(s) of	Secured Party authorizing this Continuation	Statement is
PARTY INFORMATION CHANGE:  Check one of these two boxes:  This Change affects Debtor or Secured Party of record  Description:	heck <u>o 1e</u> o' thr se three boxes to:  CHANG's rame and/or address; Complete item 6a or 6b; <u>and item 7a or 7b and</u> item 7c		e: Give record name n item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information C     6a. ORGANIZATION'S NAME	Change - provide only one name (6a or 6b)		
OR 6b. INDIVIDUAL'S SURNAME SARANZAK	FIRST PERSONAL NAME DONALD	ADDITIONAL NAME(SYMITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Perty Info  7a. ORGANIZATION'S NAME  OR  7b. INDIVIDUAL'S SURNAME	rmation Change - provide only <u>one</u> name (7a or 7b) (ur .ex.	t, full name; do not omit, modify, or abbreviate any part of	the Debtor's name)
INDIVIDUAL'S FIRST PERSONAL NAMÉ		5	<del></del>
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)		1/5	SUFFIX
7c. MAILING ADDRESS	CITY	STATE POSTAL (ODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:  All Fixtures; whether any of the foregoing is owned now or a foregoing; all records of any kind relating to any of the foregoind accounts proceeds).	cquired later; all accessions, additions, r		
9 NAME OF SECURED PARTY OF RECORD AUTHORIZING TO	HIS AMENDMENT <sup>*</sup> Provide only one name (9a	or 9b) (name of Assignor, if this is an Assigno	nent) S_Y

				_	In
9, N	AME OF SECURED PARTY OF RECORD AUTHORIZING	THIS AMENDMENT: Provide only one name (9)	a or 9b) (name of Assignor, if this is an Assignment)	Ο.	<u> </u>
lf	this is an Amendment authorized by a DEBTOR, check here an	d provide name of authorizing Debtor		M	_n
9a. ORGANIZATION'S NAME				777	二
	CITIBANK, N.A.			SC	> V
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)INITIAL(S)	SUFFIX	11
				E_	_ V

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: SARANZAK, DONALD R

58547059 23627 - CENTRAL 3762773

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

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# **UNOFFICIAL COPY**

UCC FINANCING STATEMENT AMENDMENT A FOLLOW INSTRUCTIONS	ADDENDUM		
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amend 0622817060 BK N/A PG N/A 8/16/2006 CC IL Cook	ment form		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Am	nendment form		
12a. ORGANIZATION'S NAME CITIBANK, N.A.			
OR 12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAM_			
ADDITIONAL NAME(SYINITIAL(: )	SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE US	SE ONLY
13. Name of DEBTOR on related financing stateme a Name of a current Debtor of one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or able	record required for indexing purpo	uses only in some filing offices - see Instruction item	n 13): Provide only
13a. ORGANIZATION'S NAME	breviale any part of the Debug 3 h	ane, see insuduions ii name does not iit	
OR 13b. INDIVIDUAL'S SURNAME SARANZAK	FIRST PERSONAL NAME DONALD	ADDITIONAL NAME(SYINITIAL(S)	SUFFIX
15. This FINANCING STATEMENT AMENDMENT:	17. Description of		
Covers timber to be cut Covers as-extracted collateral Sis 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):  Robert R. Saranzak and Donald R. Saranzak 1015 East Palatine Road  Arlington Heights, IL 60004	s a fixture filing Page No: N/A Book No: N/A Parcel ID		
18 MISCELLANEOUS: 58547059-IL-31 20406 - CITIBANK COMMERCIAL CITIBA	03-20-20		

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### EXHIBIT A

Lot 41 in C.A. Joels's Arlington Heights Gardens, being a subdivision in the Northeast Quarter of Section 20, Township 42 North, Range '1, Past of the Third Principal Meridian, (excepting from said lot 41 that part thereof lying North of the following described line: F egi noing in the East line of Lot 40 aforesaid, 70 feet South of the North line of said Northeast Quarter; thence Wasterly parallel to me North line of said Northeast Quarter to the West line of Lot 40 aforesaid; thence Southwesterly to a poin on the West line of Lot (1) said subdivision, 78.1 feet South of the North line of said Northeast Quarter) in Cook County, Illinois.

Permanent Index No.y03-20-201-002

Coot County Clarks