

# UNOFFICIAL COPY



Doc# 1713134020 Fee \$40.00

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KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 05/11/2017 10:25 AM PG: 1 OF 2

## UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) <b>LISA PASLEY 217-747-8663</b>
B. E-MAIL CONTACT AT FILER (optional) <b>LPASLEY@ILLINOISNATIONALBANK.COM</b>
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <b>ILLINOIS NATIONAL BANK 322 E. CAPITOL SPRINGFIELD, IL 62701</b>

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER  
**DOC #0724331058**

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

2.  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3.  ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4.  CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5.  PARTY INFORMATION CHANGE:

Check one of these two boxes:  Debtor or  Secured Party of record

AND Check one of these three boxes to:

CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c

ADD name: Complete item 7a or 7b, and item 7c

DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME  
**MARKS INVESTMENT, L.L.C.**

OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR 7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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8.  COLLATERAL CHANGE: Also check one of these four boxes:  ADD collateral  DELETE collateral  RESTATE covered collateral  ASSIGN collateral

Indicate collateral:

S 4  
P 2  
S M  
M N  
SC 5  
E 5  
INT FILE

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a DEBTOR, check here  and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME  
**ILLINOIS NATIONAL BANK 322 E. CAPITOL SPRINGFIELD, IL 62701**

OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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10. OPTIONAL FILER REFERENCE DATA:

# UNOFFICIAL COPY

STREET ADDRESS: 1325 W. WRIGHTWOOD AVENUE  
CITY: CHICAGO COUNTY: COOK  
TAX NUMBER: 14-29-314-025-0000

LEGAL DESCRIPTION:

LOT 1 IN THE SUBDIVISION OF PART OF BLOCK 43 (LYING WEST OF THE EAST LINE OF WARD STREET EXTENDED) IN SHEFFIELD'S ADDITION TO CHICAGO, SITUATED IN THE CITY OF CHICAGO, COUNTY OF COOK, STATE OF ILLINOIS

*Section - Township - 29 - 40 - 14*

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