### **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@wol	terskluwer.com			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	17779 - BANK OF			
Lien Solutions P.O. Box 29071	60827568			
Glendale, CA 91209-9071	ILIL			
	FIXTURE			
File with: Cook, IL	_			

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FIN	ANCING STATEMENT FILE NUMBER
21096355	10/7/2002 CC L. Cook

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

	Statement			
. [	ASSIGNMENT (full or partial): Provide name (, Assignee in For partial assignment, complete items 7 and 9 2 3 also independent of the state of the st		and name of Assignor in item 9	
. [2	CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law		st(s) of Secured Party authorizing this 0	Continuation Statement is
. [	PARTY INFORMATION CHANGE:	C		
C	theck one of these two boxes:	AND Chick one of these three boxes to:  — CHINGE name and/or address: Complete	ADD name: Complete item D	ELETE name: Give record name
	his Change affects Debtor or Secured Party of record	ite 16° or ub; and item 7a or 7b and item 7		be deleted in item 6a or 6b
. C	URRENT RECORD INFORMATION: Complete for Party Inform	nation Change - pr wide only one name (6a or 6b)		
	6a. ORGANIZATION'S NAME			
	DP Leasehold Illinois LLC			
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSUNA' NAME	ADDITIONAL NAME(SY	NITIAL(S) SUFFIX
		90	·   •	
7. C	I HANGED OR ADDED INFORMATION: Complete for Assignment or F	Party Information Change - provide only one name /a c 7b) (	use exact, full name; do not omit, modify, or abbrev	iate any part of the Debtor's name)
	7a. ORGANIZATION'S NAME			· · ·
	•			
R	7b. INDIVIDUAL'S SURNAME	· ·		
			CV <sub>A</sub> ,	
	INDIVIDUAL'S FIRST PERSONAL NAME		177	
			',0	
	INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S)			SUFFIX
	.,		$\bigcup_{x_{-}}$	
7c	MAILING ADDRESS	Тспу	STATE POST ALCO	DE COUNTRY
				) '
Г	7		🗆	TARRIEN W.
· L	_I COLLATERAL CHANGE: <u>Also</u> check <u>one</u> of these four t	boxes: ADD collateral DELETE coll	ateral RESTATE covered colla	ite.::! ASSIGN collateral
	Indicate collateral:			

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

				-	-
9. N	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME	NDMENT: Provide only one name (9a or 9b) (na	ame of Assignor, if this is an Assignment	() <b>S</b>	=
If	this is an Amendment authorized by a DEBTOR, check here   🔲 and provide n	ame of authorizing Debtor			~
	9a. ORGANIZATION'S NAME	·	•	,	
<b>0</b> D	Bank of America, NA			٨	
ŲK	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(SYMITIAL(S)	SUFFIX	•
				ŀ	1

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: DP Leasehold Illinois LLC

60827568

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

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### **UCC FINANCING STATEMENT AMENDMENT ADDENDUM**

FOLLOW INSTRUCTIONS					
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same 21096355 10/7/2002 CC IL Cook	e as item 1a on Amendment for	n			
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT:	Same as item 9 on Amendmen	t form			
12a. ORGANIZATION'S NAME					
Bank of America, NA					
i I					
OR 12b. INDIVIDUAL'S SURNAME					
FIRST PERSONAL NAME					
		Laustin			
ADDITIONAL NAME(SYINITI' _(S)		SUFFIX	THE ABOVE	SPACE IS FOR FILING OFFICE US	E ONLY
13. Name of DEBTOR on related financing 5.2 ent (Name	e of a current Debtor of record re	equired for indexing	purposes only in sor	ne filing offices - see Instruction item	
one Debtor name (13a or 13b) (use exactu" name; do	not omit, modify, or abbreviate	any part of the Debi	tor's name); see Instr	ructions if name does not fit	
DP Leasehold Illinois LLC					
OR 13b. INDIVIDUAL'S SURNAME	FIRST F	PERSONAL NAME		ADDITIONAL NAME(SYMITIAL(S)	SUFFIX
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):				<u> </u>	
Debtor Name and Address:					
DP Leasehold Illinois LLC - 20 W. Kinzie St , Chic	ago, IL 60654				
Secured Party Name and Address: Bank of America, NA - One Bryant Park, 35th Flo	or , New York, NY 1003/				
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		YOx	7		
			1		•
				0.	
				$O_{x_{\alpha}}$	-
				Office	
15. This FINANCING STATEMENT AMENDMENT:	<u> </u>	17 Descrip	tion of real estate:	Cv	
covers timber to be cut covers as-extracted covers.	ollateral 🔀 is filed as a fixtur	· ·	ttached		
16. Name and address of a RECORD OWNER of real estate (if Debtor does not have a record interest):	e described in item 17		ittacrica		
( 2000) 4400 /A 1810 2 / January		PERM	IANENT TA	X INDEX NUMBER	lS:
		17-09	-262-012, 1	7-09-262-015, 17-09	9-262-016
				7-09-262-021, and	
		17-09	-262-022.		
				DEL 11050	
			ESS OF PI		
		20 WE	EST KINZIE	SIREEI	
		[ See Ex	hibit for Real E	state ]	
18. MISCELLANEOUS; 60827568-IL-31 17779 - BANK OF AME	RICA COMM Bank of America,	NA `	File with: Cook, IL		

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**Debtor: DP Leasehold Illinois LLC** 

**Exhibit for Real Estate** 

17. Description of real estate:

Continued

CHICAGO, ILLINOIS

Parcel ID: See Aflached

> COOK COUNTY RECORDER OF DEEDS

COOK COUNTY RECORDER OF DEEDS

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UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY			ENT	Doc#: 1220619019 Fee: \$40.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds		RHSP Fee:\$10.00
	NAME & PHONE OF CONTACT AT FILER [0]	<del></del>			ate: 07/24/2012 09:01	
	Phone (8	800) 331-3282 Fax (8 <sup>-</sup>	18) 682-4141			
8. 5	SEND ACKNOWLEDGEMENT TO: (Name and	Maing Address) 18393 BANI	K OF AMERIC			
•				•		
	CT Lien Solutions	34083	335			
i	P.O. Box 29071	11 11				•
1	Glendale, CA 91209-9071	ILIL			•	
ł	1	FIXTU	RE			
l				THE ABOV	re space is for filling of	FFICE USE ONLY
1a 1	INITIAL FINANCING STATEMENT FILE					ATEMENT AMENDMENT IS
		ČC IL Cook Count	ty Recorder		to be filed [for record] REAL ESTATE RECO	(or recorded) in the
2	TERMINATION: Effectiveness #	inancing Statement identified and	ove is terminated with re	espect to security interest(s) of t	he Secured Party authorizing	this commission bilitement.
3.	CONTINUATION: Effectiveness of the continued for the additional period provide		ove with respect to the s	security interest(s) of the Secure	ed Party authorizing this Cors	numbor: Statement is
4.	ASSIGNMENT (full or partial): Give	name of a signee in item 7a or i	7b and address of as	ssignee in 7c; and also give	name of assignor in item	9.
5. A	MENDMENT (PARTY INFORMATION):			d Party of record. Check only o		
	Also check one of the following three both					lata Nama Maran Mharandalan
_	CHANGE name and/or eddress: Give our name (if name change) in item 7s or 7b a			DELETE name: Give record nar to be deleted in item 6a or 6b.		lete item 7a or 7b. and also plete items 7d-7g (if applicable)
6. C	URRENT RECORD INFORMATION:					
	68 ORGANIZATION'S NAME DP LEASEHOLD (ILLI	NOIS), L.L.C.	0/			
OR	66. INDIVIDUAL'S LAST NAME		FIRST N' ME		MIDDLE NAME	SUFFIX
				_		
7. C	HANGED (NEW) OR ADDED INFORM	ATION:		/	· · · · · · · · · · · · · · · · · · ·	
	7a. ORGANIZATION'S NAME			10x		
OR	7b. INDIVIDUAL'S LAST NAME	<del></del>	FIRST NAME	<u> </u>	James Carret	LOUETIN
i	10. MIDIAIDONE 2 DV31 MAME		FIRST NAME		MIDDLE NAME	SUFFIX
 70 N	AAILING ADDRESS		СПУ		STATE POSTAL CODE	COUNTRY
		I v mar or one and a vice man		(0)	_	
7a. <u>≥</u>	GEE INSTRUCTION ADD'L INFO RE ORGANIZATION DEBTOR	7e, TYPE OF ORGANIZATION	77. JURISDICTION	OF ORGANIZATION	OPGANIZATIONAL ID :	F, # any
8. A	MENDMENT (COLLATERAL CHANGE	): check only one_box.	-			
E	Describe collateral deleted or 🔲 adde	ed, or give entire restated colla	steral description, or o	ન્યવોદદક ြાજાવામીલા edinosel		•
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					(D) D.	о́∑о́ш≧
	AME on CEOUNER DARRY - DECC	D ALTHOUGH A THE CASE	DIJETT:			<u> </u>
9, N	AME OF SECURED PARTY OF RECOR	(U AUTHORIZING THIS AMENI , or if this is a Termination authorized	UMENT (name of assi t by a Debtor, check he		if this is an Amendment author FOR authorizing this Amendm	
	98. ORGANIZATION'S NAME	IONAL ASSOCIAT	<u> </u>			
OR	19b. INDIVIDUAL'S LAST NAME		FIRST NAME	<del>,_,</del>	MIDDLE NAME	SUFFIX
						1

10. OPTIONAL FILER REFERENCE DATA 34083335 Debtor Name: DP LEASEHOLD (ILLINOIS), L.L.C.

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UCC FINANCIN			MENT ADDENDUM
11. PATHAL FINANCING 0021096355	· · ·-	(same as rom 1a os	Armindmarc family
AMERICAN	MATIONAL MPANY OF	BANK AN	ng dig (AST) 9 can Annuncrove's Rain's ID
CF 124 3 DI-IDUAL S CA	2. WINE	PRIST HAVE	SHOOLE WANTE STATES
13. Use this space for a	information		=

### PARCEL 1:

LOTS 3, 4, 5, 6, 7 AND &IN WOLCOTT'S ADDITION TO CHICAGO IN THE EAST 1/2 OF SECTION 9, TOWNSHIP 39 NORTH, WANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

### PARCEL 2:

LOT 2 IN BLOCK 1 IN WOLCOTT'S ADDITION TO CHICAGO IN SECTION 9, TOWNSHIP 39 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN. IN COOK COUNTY, ILLINOIS.

PERMANENT TAX INDEX NUMBERS: 17-09/262-012; 17-09-262-015; 17-09-262-016; 17-09-262-021; Olympia Clark's Offica 17-09-262-022 AND 17-09-262-017

#### ADDRESS OF PREMISES:

20 WEST KINZIE STREET CHICAGO, ILLINOIS