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	erskluwer.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	15795 - BAYVIEW
Lien Solutions P.O. Box 29071	62012842
Glendale, CA 91209-9071	ILIL
	FIXTURE
File with: Cook II	

*1803604028*
Doc# 1803604028 Fee \$42.00
RHSP FEE:\$9.00 RPRF FEE: \$1.00 KAREN A.YARBROUGH COOK COUNTY RECORDER OF DEEDS
DATE: 02/05/2018 10:55 AM PG: 1 OF 3

THE ABOVE	SPACE IS F	OR FILING	OFFICE USE	ONLY
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1a. INITIAL FINANCING STATEMENT FILE ("UMBER 0803503101 2/4/2008 CC IL COOK	(or recorded) in t	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 Financing Statement identified above Statement	ve is terminated with respect to the security in	nterest(s) of Secured Party authorizing this T	ermination		
ASSIGNMENT (full or partial): Provide name of Assigner in item 7a or 7b     For partial assignment, complete items 7 and 9 and all o in linear affected		ame of Assignor in item 9			
CONTINUATION: Effectiveness of the Financing Statement ider inied 1bc continued for the additional period provided by applicable law	ove with respect to the security interest(s) of	Secured Party authorizing this Continuation	Statement is		
5. PARTY INFORMATION CHANGE:					
Check one of triese two boxes:	ne n thuse three boxes to:				
This Change affects Debtor or Secured Party of record item		ADD name: Complete item DELETE name 7a or 7b, and item 7c to be deleted in	e: Give record name л item ба or бb		
6. CURRENT RECORD INFORMATION: Complete for Party Information Change	e - provide only one name (6a or 6b)				
6a, ORGANIZATION'S NAME					
OR 66. INDIVIDUAL'S SURNAME	FIRST PERSONAL N ME	ADDITIONAL NAME(SYINITIAL(S)	SUFFIX		
GLOSSBERG	DAVID	L.			
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information	Change - provide only one name (7a or 7b) (r arex of	, full name; do not omit, modify, or abbreviate any part of	the Debtor's name)		
7a. ORGANIZATION'S NAME			,		
OR 7b. INDIVIDUAL'S SURNAME		=7~/			
		4			
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)		175	SUFFIX		
7c. MAILING ADDRESS	СПУ	STATE POSTAL CODE	COUNTRY		
8. COLLATERAL CHANGE: Also check one of these four boxes: A	ADD collateral DELETE collateral	RESTATE covered collateral	ASSIGN collateral		

_				
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			
	DANG/JEW LOAN CEDVICING LLC			

99. ORGANIZATION'S NAME
BAYVIEW LOAN SERVICING, LLC

OR
9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S)

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: GLOSSBERG, DAVID L.

62012842 70767

Property address: 2345 W Taylor Street, Chicago, IL. 60612

Indicate collateral:

200063239



## **UNOFFICIAL COPY**

## **UCC FINANCING STATEMENT AMENDMENT ADDENDUM**

FOL	LOW INSTRUCTIONS					
	NITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendr 3503101 2/4/2008 CC IL Cook	ment form				
12,	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Am	endment form				
	12a. ORGANIZATION'S NAME BAYVIEW LOAN SERVICING, LLC					
	BATVIEW EGAN GENVIOING, EEG					
OR	12b. INDIVIDUAL'S SURNAME					
	FIRST PERSONAL NALE					
	THO TELOGRAPHIA					
	ADDITIONAL NAME(SYINITIAL(S)	15	SUFFIX			
				THE ABOVE S	PACE IS FOR FILING OFFICE US	E ONLY
13.	Name of DEBTOR on related financing stateme.it (thame of a current Debtor of one Debtor frame (13a or 13b) (use exact, full name; do not omit, modify, or abl					13): Provide only
	13a. ORGANIZATION'S NAME					
OR	13b. INDIVIDUAL'S SURNAME GLOSSBERG	FIRST PERSON	NAL NAME		ADDITIONAL NAME(S)INITIAL(S)	SUFFIX
14	ADDITIONAL SPACE FOR ITEM 8 (Collateral):	10, 11,2				
Del	otor Name and Address:					
GL	OSSBERG, DAVID L 1821 S. PEORIA STREET , CHICAGO, I	IL 60608			-	
Sec BA	cured Party Name and Address: /VIEW LOAN SERVICING, LLC - 4425 PONCE DE LEON BLVD	). 5TH FL′20	R, CORAL	GABLES, FL 33	146	
			0,		•	
			Dx			
			T			
	BAYVIEW LÓAN SERVICING, LLC - 4425 PONCE DE LEON BLVD. 5TH FLOOR, CORAL GABLES, FL 33146					
					Co	
15	This FINANCING STATEMENT AMENDMENT:		17 Descript	on of real estate:		
10.		s a fixture filing		TTACHED		
	Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):					
	,					
			Parcel	ID:		
			17-18-	327-013-00	000	
18.	MISCELLANEOUS: 62012842-IL-31 15795 - BAYVIEW SERVICING BAYVIE	EW LOAN SERVI	CING, LLC	File with: Cook, IL	70767 200063239	

## **UNOFFICIAL COPY**

LOT 31 IN WHEELER'S SUBDIVISION OF BLOCK 11 OF MORRIS AND OTHERS SUBDIVISION OF THE WEST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 18, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Coot County Clerk's Office