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## UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional)

Corporation Service Company 1-800-858-5294 B. E-MAIL CONTACT AT FILER (optional)



Doc# 1804413075 Fee \$40.00

SF	PRFilling@cscinfo.com		RH	SP FEE:	69.00 RP	RF FEE: \$1	.00
	ND ACKNOWLEDGMENT TO: (Name and Address)		KA	REN A.YA	ARBROUGH		
1	<u>.</u> 425 96013	$\neg I$	CO	OK COUN	TY RECOR	DER OF DEE	DS
ı	orporation Service Company	' [	DA	TE: 02/:	13/2018	03:27 PM	PG: 1 0F 2
	1 Adlai Stevenson Drive						
S	oringfield, IL 62703 Filed In:						-
		(Cook)	HE ABOVE SPA	CE IS FO	R FILING C	OFFICE USE C	ONLY
	TIAL FINANCING STATEMENT FILE N IMBER 7034047 06/18/2012	(or red	NANCING STATE orded) in the REAL ttach Amendment Ad	. ESTATÉ F	RECORDS	-	-
_	TERMINATION: Effectiveness of the Financing Statement identified above is to Statement	terminated with respect to	the security intere	st(s) of Sec	ured Party a	authorizing this	Termination
	ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and For partial assignment, complete items 7 and 9 and also incluate affected collate		tem 7c <u>and</u> name o	of Assignor	in item 9	•	
	CONTINUATION: Effectiveness of the Financing Statement identified above voontinued for the additional period provided by applicable law	with respect to the securit	y interest(s) of Sec	ured Party	authorizing	this Continuation	n Statement is
5. 🗌	PARTY INFORMATION CHANGE:						
Che	ck one of these two boxes:  AND Check one of in	iese three boxes to: ame and/or address: Comp	lete, ADD nar	ne: Comple	te item 📖 🛚	DELETE name: (	Give record name
_	Change affects Debtor or Secured Party of record item 6a ( 6	b; and item 7a or 7b and ite	m.7c7aor7b	and item 70		o be deleted in it	em 6a or 6b
_	RRENT RECORD INFORMATION: Complete for Party Information Change - p . ORGANIZATION'S NAME	orc vide or.ly one name (6a	or 6b)				
l oa	. ORGANIZATION S NAME	0,					
OR 65	, INDIVIDUAL'S SURNAME FIR:	ST PERSONAL N' IMIT		ADDITION	NAL NAME(S	)/INITIAL(S)	SUFFIX
١M	ORANDO MA	ARIA		ELEN	Α		
7. CH.	ANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Cha	ange - provide only one name (/a	or 7b) (use exact, full na	me; do not on	nit, modify, or ab	breviate any part of	the Debtor's name)
	ORGANIZATION'S NAME						
OR -						_	
76	, INDIVIDUAL'S SURNAME		Cy				
	INDIVIDUAL'S FIRST PERSONAL NAME			<u> </u>			
	INDIVIDUALS PIRST PERSONAL NAME			9			
-	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				$\bigcirc$	•	SUFFIX
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7c. MA	ILING ADDRESS CIT	Y		STATE	POSTAL /J	ODS -	COUNTRY
				L		<u> </u>	
В. 🗌	COLLATERAL CHANGE: Also check one of these four boxes: ADD colle	ateral DELETE o	ollateral [ ]	RESTATE O	overed collat	eral A	SSIGN collateral
	indicate collateral:						,
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9. NA	ME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENI	DMENT: Provide only on	aname (9a or 9b) (	name of Ass	ignor, if this	is an Assignmen	it)
		of authorizing Debtor				· · · · · · · · · · · · · · · · · · ·	No.
9a	ORGANIZATION'S NAMELNY CORPORATION						• •

9. 1	NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS	S AMENDMENT: Provide only one name	e (9a or 9b) (name of Assignor, if this is an Assignment	)
	If this is an Amendment authorized by a DEBTOR, check here 🔲 and provi	ide name of authorizing Debtor	. <u> </u>	
	9a, ORGANIZATION'S NAMELNY CORPORATION			
ΩR				
٠.,	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA: Debtor: MARIA ELENA MORANDO - AI60002395

1425 96013

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1217034047 06/18/2012	Amendment form		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9	on Amendment form		
12a. ORGANIZATION'S NAME LNV CORPORATION			
OR 12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INFILE(C)	SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE	USE ONLY
13. Name of DEBTOR on related financing state tent (Name of a current Det one Debtor name (13a or 13b) (use exact, full name; Jo not omit, modify, or abbut	-	g purposes only in some filing offices - see Instruction item	
13a. ORGANIZATION'S NAME			
OR 13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
15. This FINANCING STATEMENT AMENDMENT:		N BLOCK 5 IN GARFIELD IN SECT	