UNOFFICIAL COPY

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS						
A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294			*18068			
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com		Doc# 18	0684407	73 Fee \$42.00		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		RHSP FEE:	\$9.00 RPR	F FEE: \$1.00	·	
1436 17885		KAREN A.Y	ARBROUGH		•	
CSC 801 Adlai Stevenson Drive		SOOK COUN	TY RECORD	ER OF DEEDS	i	
	In: Illinois (Cook) [DATE: 03/	09/2018 0	3:47 PM PG: 1 0	F 3 '	
	`	TĤŁ,,,,,,,,,,	MADE TO I'V	azalend Opplesione.	UNEY	
1a. INITIAL FINANCING STATEMENT FILE NAME FOR THE TRANSPORT OF THE TRANSPO		(or recorded) in the R	EAL ESTATE	ENDMENT is to be filed [for RECORDS rm UCC3Ad) <u>and</u> provide Debt		
TERMINATION: Effectiveness of the Final.cir J Statement identified above Statement	e is terminated v	ith respect to the security in	terest(s) of Se	cured Party authorizing this	Termination	
ASSIGNMENT (full or partial): Provide name of Assigner in item 7a or 71 For partial assignment, complete items 7 and 9 and also indicate affected complete.	ollateral in item 8	3				
CONTINUATION: Effectiveness of the Financing Statemen identified ab continued for the additional period provided by applicable law	ove with respect	to the security interest(s) of	Secured Party	authorizing this Continuati	on Statement is	
5. PARTY INFORMATION CHANGE:						
Check one of these two boxes: AND Check one of these boxes to: CHANGE name unturn address: Complete This Change affects Debtor or Secured Party of record item 6a or 6b; and item 7c ADD name: Complete item DELETE name: Give record name item 6a or 6b; and item 7c to be deleted in item 6a or 6b.						
6. CURRENT RECORD INFORMATION: Complete for Party Information Chan 6a. ORGANIZATION'S NAME						
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
Williams	Roberta	1				
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information	on Change - provide o	only one name (7a or 7), (use e: act, f	full name; do not o	mit, modify, or abbreviate any part o	of the Debtor's name)	
7a. ORGANIZATION'S NAME						
OR 7b. INDIVIDUAL'S SURNAME						
τ_{c}						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAMÉ(S)/INITIAL(S)				1)5.	SUFFIX	
7c. MAILING ADDRESS	CITY	<u>. </u>	STATE	POSTAL CCODE	COUNTRY	
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD	collateral	DELETE collateral	RESTATE	covered collateral	ASSIGN collateral	
2014 OFFICA Biller M# PEG515003100510 S# 451400	-	<u></u>				
2014 UTICA Boller IVI# PEG313003100310 3# 43140	7100					
		•				
		<u></u>		<u> </u>		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM			b) (name of As	signor, if this is an Assignme	ent)	
If this is an Amendment authorized by a DEBTOR, check here and provide n 9a. ORGANIZATION'S NAMEMICROf	ame of authorizin	g Deotor				
OR 95. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
					11.000	
10. OPTIONAL FILER REFERENCE DATA: Debtor: Roberta William	าร				1436 17885	



1806844073 Page: 2 of 3

UNOFFICIAL COPY

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS	
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 1519429051 07/13/2015	
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME Microf	·
OR 12b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
13. Name of DEBTOR on related financing stat amont (Name of a current Debtor of record required for indexione Debtor name (13a or 13b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's r	ng purposes only in some illing offices - see instruction item 15). Provide only name); see Instructions if name does not fit
OR 13b. INDIVIDUAL'S SURNAME Williams First Personal NAME Roberta	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):	
· Co.	
	Control of the contro
	C
	O/L
15. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut Covers as-extracted collateral If Description See atta	n of real esiate: iched. APN: 25-03-325-006-0000
16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): 9415 S Prairie AVe	
Chicago, IL 60619	
18. MISCELLANEOUS:	

THE MONTHHEBE CHICAGO CRAM THIRD I'd cours of the calches, noor lelled and 37 SORTH, PREGN 14 MADE OF A BUNDLYIGION MADE NY CALIMEN AND IN THE POINTMENT IN THE DOOR OR AMED DANCES OF BLOCKS Clart's Office EL CAR REGIE b. O DOCE COMPANY OF THE RESIDENTIALON THE THE PRINCIPLE E OF THE BOUTHBART RALLMOND IN BECTLON PRIDGIPAL MERIDIAN E