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### **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@wolte	erskluwer.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address)  Lien Solutions P.O. Box 29071	506730 - TRIMONT REAL 63547962
Glendale, CA 91209-9071	ILIL FIXTURE

*1809519055*	
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Doc# 1809519055 Fee \$42.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00

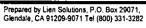
KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 04/05/2018 01:59 PM PG: 1 OF 3

	FIXTURE <sub>I</sub>			
File with: Cook, IL		THE ABOV	E SPACE IS FOR FILING OFFIC	E USE ONLY
18. INITIAL FINANCING STATEMENT FOR NUMBER 1321110047 7/30/2013 CC/L Cook		or recorded) in th	STATEMENT AMENDMENT is to be fi to REAL ESTATE RECORDS thent Addendum (Form UCC3Ad) and provide	
2. TERMINATION: Effectiveness of the Financing Statement ident Statement	fied above is terminated wit	<del></del>		
<ol> <li>ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and r so i dica</li> </ol>			ne of Assignor in item 9	
<ol> <li>CONTINUATION: Effectiveness of the Financing Statement ider continued for the additional period provided by applicable law</li> </ol>	above with respect to	the security interest(s) of S	ecured Party authorizing this Continue	ation Statement is
5. PARTY INFORMATION CHANGE:				<del></del>
Check one of these two boxes:	Check rie of these three bo		DD Complete No	
This Change affects Debtor or Secured Party of record	item 62 or oo, and item		DD name: Complete item DELETE a or 7b, <u>and</u> item 7c to be dele	name: Give record name sted in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information	on Change - provide ⊍nhy ဋ າ	e name (6a or 6b)		
68. ORGANIZATION'S NAME ONE EAST WACKER PARTNERS LLC		),		
OR 86. INDIVIDUAL'S SURNAME	FIRST PERSON	LNAME	ADDITIONAL NAME(S)/INITIAL(S	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party	Information Change - provide only	one name (/a o/ 7b) (use exact, f	uli name; do not omit, modify, or abbreviate any p	art of the Debtor's name)
7a, ORGANIZATION'S NAME				
OR 7b. INDIVIDUAL'S SURNAME	•		9	
INDIVIDUAL'S FIRST PERSONAL NAME			7.0	
INDIVIDUAL'S ADDITIONAL NAME(SYMITIAL(S)			Ox	SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL LOPE	COUNTRY
B. COLLATERAL CHANGE: Also check one of these four boxe	es: ADD collateral	DELETE collateral	RESTATE covered collatera	ASSIGN collateral
Indicate collateral:			MEDIATE COVERED CONDUCTS	ASSIGN COllaterar
	•			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING	THIS AMENDMENT: P	rovide only <u>one</u> name (9a o	9b) (name of Assignor, if this is an Ass	signment)
	nd provide name of authoriz	ing Debtor		
98. ORGANIZATION'S NAME  AMERICAN GENERAL LIFE INSURANCE CO	MPANY			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(SYINITIAL(S	SUFFIX
			TOO HOW E HAME(O) HIS INCO	,
10. OPTIONAL FILER REFERENCE DATA: Debtor Name: ONE		NEDSILC	<u> </u>	
63547962 1911301	LAST WACKER PART	HLRO LLO	AIG	





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	C FINANCING STATEMENT AMENDMENT A	DDENDUM		
_	LOW INSTRUCTIONS			
	IITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendn 1110047 7/30/2013 CC IL Cook	ment form		
	IAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Ame	endment form		
1	12a. ORGANIZATION'S NAME			
	AMERICAN GENERAL LIFE INSURANCE COMPANY			
<u> </u>				
OR	12b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL (JAM).			
	ADDITIONAL NAME(S)INITIAL(S)	SUFFIX	: ABOVE SPACE IS FOR FILING OFFICE US	E ONLY
13. 1	name of DEBTOR on related financing sizer at Name of a current Debtor of a	record required for indexing purposes of	only in some filing offices - see Instruction item	
: 1	ne Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abb	previate any part of the Debtor's name)	); see instructions if name does not tit	
	ONE EAST WACKER PARTNERS LLC			
OR	13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	ODITIONAL SPACE FOR ITEM 8 (Collateral): or Name and Address:			· ·
Deb ONE Seci	EAST WACKER PARTNERS LLC - 250 Broadway Suite 3.01, ired Party Name and Address:		Cit. OA GOOGT	
Deb ONE Section AME	EAST WACKER PARTNERS LLC - 250 Broadway Suite 3.01, ired Party Name and Address: RICAN GENERAL LIFE INSURANCE COMPANY - 1999 Ave of		OFFICE OFFICE	

File with: Cook, IL

1911301 AIG

AMERICAN GENERAL LIFE

18. MISCELLANEOUS; 63547962-IL-31 506730 - TRIMONT REAL ESTATE

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#### **EXHIBIT B**

LOTS 1 TO 8 IN BLOCK 8 IN FORT DEARBORN ADDITION TO CHICAGO, THE WHOLE SOUTHWEST FRACTIONAL 1/4 OF SECTION 10, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 17-10-302-027-0000 and 17-10-302-028-0000

Address:

Opening Opening Clark's Opping

Opening Clark's Opping Common Address: One East Wacker Drive, Chicago, Illinois