



· · · · · · · · · · · · · · · · · · ·						
CC FINANCING STATEMENT AMENDMENT	Τ	Doc# 18	3136160	44 Fee \$4	2.00	
DLLOWINSTRUCTIONS		10000 555		NE EEE - 44 A	•	
NAME & PHONE OF CONTACT AT FILER (optional) Nick Barzellone 405-236-0003		RHSP FEE:\$9.00 RPRF FEE: \$1.00				
E-MAIL CONTACT AT FILER (optional)		KAREN A. YARBROUGH			i I	
		ļ		DER OF DEEDS		
SEND ACKNOWLEDGMENT TO: (Name and Address)		DHIE: 057	16/2018 1	12:22 PM PG	: 1 OF 3	
McCoy & Orta, P.C.	\neg					
100 North Broadway, 26th Floor						
Oklahoma City, OK 73102	,		,			
_	_ 	THE ABOVE SPA	CE IS FOR I	FILING OFFICE	LISE ONLY	
INITIAL FINANCING STATEME, IT : I _ NUMBER		nis FINANCING STATE	MENT AMENO	DMENT is to be file		
36313078 filed 12/29/17	Fì		dendum (Form I	UCC3Ad) <u>and</u> provid	e Debtor's name in item 13	
TERMINATION: Effectiveness of the Financing Statement identified above Statement	is terminated with respe	ct to the security interes	st(s) of Secur	red Party authorizii	ng this Termination	
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, For partial assignment, complete items 7 and 9 and also indicate affected co	. <u>and</u> address of Assigne blateral in item 8	e in item 7c <u>and</u> name c	of Assignor in	item 9		
CONTINUATION: Effectiveness of the Financing Statemer' ide. tified abo continued for the additional period provided by applicable la i	ove with respect to the se	curity interest(s) of Sec	ured Party au	uthorizing this Con	tinuation Statement is	
PARTY INFORMATION CHANGE:		 -			<u>.</u>	
	of these three boxes to:	Complete ADD non	ne: Complete i	item DELETE	name: Give record name	
	or 6b; and item 7a or 7b a	nd item 7c 7a or 7b,	and item 7c	to be dele	eted in item 6a or 6b	
CURRENT RECORD INFORMATION: Complete for Party Information Change 6a. ORGANIZATION'S NAME	e - p ovide i nly <u>one</u> name	(6a or 6b)				
	e - p ovide i nly <u>one</u> name	(6a or 6b)			<u></u>	
6a. ORGANIZATION'S NAME	FIRST PERSONAL NAME		ADDITIONA	ił name(syinitiai	L(S) SUFFIX	
6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME	FIRST PERSON COMME	×,				
•	FIRST PERSON COMME	×,				
6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE*	FIRST PERSON COMME	×,				
6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME	FIRST PERSON COMME	×,				
6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE*	FIRST PERSON COMME	×,				
6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME	FIRST PERSON COMME	×,				
6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 7b. INDIVIDUAL'S SURNAME	FIRST PERSON COMME	×,				
6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	FIRST PERSON C. P. M. In Change - provide only gng nar	×,	Ime; do not omit,	modify, or abbreviate an	suffix	
66. ORGANIZATION'S NAME 66. INDIVIDUAL'S SURNAME HANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 76. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 76. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) IAILING ADDRESS 8 Greenwich Street, 14th FI.	FIRST PERSON COMME	: (/a or 7b) (use exact, full na	STATE PO	modify, or abbreviate and modify, and modify	SUFFIX COUNTRY USA	
56. ORGANIZATION'S NAME 56. INDIVIDUAL'S SURNAME HANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 76. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 76. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) IAILING ADDRESS Greenwich Street, 14th FI.	FIRST PERSON COMME	: (/a or 7b) (use exact, full na	Ime; do not omit,	modify, or abbreviate and modify, and modify	suffix	
56. ORGANIZATION'S NAME 56. INDIVIDUAL'S SURNAME HANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 76. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 76. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) IAILING ADDRESS Greenwich Street, 14th FI. COLLATERAL CHANGE: Also check one of these four boxes: ADD of Indicate collateral:	FIRST PERSON C NAME on Change - provide only gng nav	TE collateral	STATE POR NY 1	OSTAL GODE	SUFFIX COUNTRY USA ASSIGN collateral	
66. INDIVIDUAL'S SURNAME HANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) IAILING ADDRESS 3 Greenwich Street, 14th FI. COLLATERAL CHANGE: Also check one of these four boxes: ADD of Indicate collateral: DR THE REGISTERED HOLDERS OF WELLS FAF	FIRST PERSON C MANAGE TO THE PERSON OF THE P	TE collateral	STATE POR STATE COVERESTATE CO	OSTAL GODE	SUFFIX COUNTRY USA ASSIGN collateral	
6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 3 Greenwich Street, 14th FI. COLLATERAL CHANGE: Also check one of these four boxes: ADD of Indicate collateral: OR THE REGISTERED HOLDERS OF WELLS FAF	FIRST PERSON C MANAGE TO THE PERSON OF THE P	TE collateral	STATE POR STATE COVERESTATE CO	OSTAL GODE	SUFFIX COUNTRY USA ASSIGN collateral	
6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 8 Greenwich Street, 14th FI. COLLATERAL CHANGE: Also check one of these four boxes: ADD of Indicate collateral: OR THE REGISTERED HOLDERS OF WELLS FAF	FIRST PERSON C MANAGE TO THE PERSON OF THE P	TE collateral	STATE POR STATE COVERESTATE CO	OSTAL GODE	SUFFIX COUNTRY USA ASSIGN collateral	
6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 8 Greenwich Street, 14th FI. COLLATERAL CHANGE: Also check one of these four boxes: ADD of Indicate collateral; OR THE REGISTERED HOLDERS OF WELLS FAF JLTIFAMILY MORTGAGE PASS-THROUGH CERTIFICAMILY MORTGAGE PASS-THROUGH CERTIFICAMICAMILY MORTGAGE PASS-THROUGH CERTIFICAMICAMICAMICAMICAMICAMICAMICAMICAMICAM	CITY New York collateral DELE RGO COMMERC IFICATES, SERI	TE collateral R	STATE POR NY 1	OSTAL CODE 10011	SUFFIX COUNTRY USA ASSIGN collateral C., Sy P 3 M N	
GB. ORGANIZATION'S NAME Gb. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 8 Greenwich Street, 14th FI. COLLATERAL CHANGE: Also check one of these four boxes: □ ADD of Indicate collateral: OR THE REGISTERED HOLDERS OF WELLS FAF JLTIFAMILY MORTGAGE PASS-THROUGH CERTIFICATION AND CERTIFI	CITY New York collateral DELE RGO COMMERC IFICATES, SERI	TE collateral R	STATE POR NY 1	OSTAL CODE 10011	SUFFIX COUNTRY USA ASSIGN collateral C., Sy P 3 M N	
6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 8 Greenwich Street, 14th FI. COLLATERAL CHANGE: Also check one of these four boxes: ADD of Indicate collateral; OR THE REGISTERED HOLDERS OF WELLS FAF JLTIFAMILY MORTGAGE PASS-THROUGH CERTIFIED IN A MILING ADDRESS AND A CERTIFIED IN A MILING A SECURED PARTY OF RECORD AUTHORIZING THIS AMILING IN SECURED PARTY OF RECORD AUTHORIZING	CITY New York collateral DELE RGO COMMERC IFICATES, SERI	TE collateral RECIAL MORTGAGES 2018-SB48	STATE POR STATE COVERSTATE COVERS	OSTAL CODE 10013 ared collateral URITIES, IN	SUFFIX COUNTRY USA ASSIGN collateral C., P 3 M N signment) SC	
6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME CITIBANK, N.A., AS TRUSTEE* 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 8 Greenwich Street, 14th FI. COLLATERAL CHANGE: Also check one of these four boxes: ADD of Indicate collateral; OR THE REGISTERED HOLDERS OF WELLS FAF JLTIFAMILY MORTGAGE PASS-THROUGH CERTIFIED IN A MILING ADDRESS AND A CERTIFIED IN A MILING A SECURED PARTY OF RECORD AUTHORIZING THIS AMILING IN SECURED PARTY OF RECORD AUTHORIZING	CITY New York collateral DELE RGO COMMERC IFICATES, SERI	TE collateral RECIAL MORTGAGES 2018-SB48	STATE POR STATE COVERSTATE COVERS	OSTAL CODE 10011	SUFFIX COUNTRY USA ASSIGN collateral C., P 3 M N signment) SC	

1813616044 Page: 2 of 3

UNOFFICIAL COPY

UCC FINANCING STATEMENT AMENDMENT AD FOLLOW INSTRUCTIONS	DENDUM					
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendme 1736313078 filed 12/29/17						
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amend						
12a. ORGANIZATION'S NAME FEDERAL HOME LOAN MORTGAGE CORPORATION						
OR 12b. INDIVIDUAL'S SURNAME						
FIRST PERSONA', I'AM :						
ADDITIONAL NAME(\$)/II ITI/_(5)						
70	SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE U	ISE ONLY			
13. Name of DEBTOR on related financing statement (Name of a current Debtor of reconnection Debtor name (13a or 13b) (use exact, full notine do not omit, modify, or abbreviate any	ord required for indexi y part of the Debtor's r	ng purposes only in some filing offices - see Instruction item				
13a ORGANIZATION'S NAME 1920/2245 W 21ST, LLC						
[130. INDIVIDUAL'S SURNAME FIRST	PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):						
15. This FINANCING STATEMENT AMENDMENT:	, ·····	n of real estate:				
		covering the property more specifically described on				
(if Debtor does not have a record interest):	Exhibit ".	Exhibit "A", attached hereto and made a part hereof				
	PINs: 17	PINs: 17-19-319-007-0000 and 17-19-422-039-0000				
	Property Addresses: 2245 W. 21st Street and 1920 W. 21st Place, Chicago, IL 60608					
18. MISCELLANEOUS;						

1813616044 Page: 3 of 3

UNOFFICIAL COPY

EXHIBIT ALEGAL DESCRIPTION

Real property in the City of Chicago, County of Cook, State of Illinois, described as follows:

PARCEL 1

LOT: 40 IN GLOVER'S SUBDIVISION OF NORTH 1/2 OF BLOCK 61 IN SUBDIVISION OF SECTION 19, TOW ISHIP 39 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL 2

LOT 18 AND THE EAST VS OF LOT 19 IN THOMAS AND JOHN D. PARKER'S SUBDIVISION OF BLOCK 58 IN THE SUSDIVISION OF SECTION 19, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MEPIPIAN, IN COOK COUNTY, ILLINOIS.

PINs: 17-19-319-007-0000 and 17-19-422-039-0000

Property Addresses: 2245 W. 21st Street and 1920 W. 21st Place, Chicago, IL 60608

Loan No.: 501187936 M&O File No.: 7471.081

Loan Name: 2245 West 21st Street and 1920 West 21st Place

Pool: SB-48