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Doc# 1820104031 Fee \$42.00

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

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 07/20/2018 12:44 PM PG: 1 OF 3

### 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@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 20687 - ASSOCIATED Lien Solutions 65364185 P.O. Box 29071 Glendale, CA 91209-9071 ILIL **FIXTURE** File with: Cook, IL

| THE | ADOVE | CDACE | 10 | EAD | EH INC | <b>AFFICE</b> | HOE | ONL |
|-----|-------|-------|----|-----|--------|---------------|-----|-----|

| a. INITIAL FINAN | CING STATEMENT FILE NUMBER |  |
|------------------|----------------------------|--|
| 1607656043       | 3/16/2016 CC IL Couk       |  |

14h AZIThis FINANCING STATEMENT AMENDMENT is to be filed for record

| 1607656043 3/16/2016 CC IL CC.K   | (or recorded   | (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 |                    |  |  |  |
|---|--|--|--------------------|--|--|--|
| P. TERMINATION: Effectiveness of the Financing Statement identified about Statement   | ove is terminated with respect to the secu                       | rity interest(s) of Secured Party authorizing this T   | ermination         |  |  |  |
| ASSIGNMENT (full or partial): Provide name of Assign(e in item 7a or 7 For partial assignment, complete items 7 and 9 and also indicate affect. |  | nd name of Assignor in item 9  |                    |  |  |  |
| CONTINUATION: Effectiveness of the Financing Statement ide tified continued for the additional period provided by applicable law                | bove with respect to the security interest(                      | s) of Secured Party authorizing this Continuation  | Statement is       |  |  |  |
| 5. PARTY INFORMATION CHANGE:  | 0/   | ·  |                    |  |  |  |
| Check the of these two boxes.   | on of these three boxes to:  HANGE name and/or address: Complete | ADD name: Complete item DELETE name  | : Give record name |  |  |  |
| This Change affects Debtor or Secured Party of record ite   | em 6a or 6b; <u>ar o</u> ite. 1 7a or 7b <u>and</u> item 7c      | 7a or 7b, and item 7c to be deleted in   |                    |  |  |  |
| 3. CURRENT RECORD INFORMATION: Complete for Party Information Chan  | ge - provide only one name (6a or 6b)                            |  |                    |  |  |  |
| 6a. ORGANIZATION'S NAME   | 0,   |  |                    |  |  |  |
| B.L. DOWNEY COMPANY LLC   | 4  |  | •                  |  |  |  |
| OR 6b. INDIVIDUAL'S SURNAME   | FIRST PERSONAL NAME  | ADDITIONAL NAME(SYINITIAL(S)   | SUFFIX             |  |  |  |
| T CHANGED OD ADDED INFORMATION CO   | 0 11 1 7 7 71  |  |                    |  |  |  |
| <ol> <li>CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information.</li> <li>ORGANIZATION'S NAME</li> </ol>                    | on Change - provide only one name (/a or /b) { se                | exat , ital name; so not ornit, modify, or aboreviate any part or t  | ne Debtor's name)  |  |  |  |
|   |  | 0.   |                    |  |  |  |
| 76. INDIVIDUAL'S SURNAME  |  | 4  |                    |  |  |  |
| INDIVIDUAL'S FIRST PERSONAL NAME  |  | 9,   |                    |  |  |  |
|   |  |  |                    |  |  |  |
| INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S)   | -  |  | SUFFIX             |  |  |  |
| 7c. MAILING ADDRESS   | CITY   | STATE POSTAL CODE  | COUNTRY            |  |  |  |
|   |  | C)   |                    |  |  |  |
| 3. COLLATERAL CHANGE: Also check one of these four boxes:   | ADD collateral DELETE collate                                    | ral RESTATE covered collateral   | ASSIGN collateral  |  |  |  |
| Indicate collateral:  |  |  |                    |  |  |  |
|   |  |  | S_                 |  |  |  |
|   |  |  | p <sup>-</sup>     |  |  |  |
|   |  |  | F                  |  |  |  |

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 Associated Bank, National Association

FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: B.L. DOWNEY COMPANY LLC

65364185 31013

9b. INDIVIDUAL'S SURNAME

30868915953

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#### LICC FINANCING STATEMENT AMENDMENT ADDENDUM

| FOLLOW INSTRUCTIONS  | HUMENI ADDI                |                        |                         |                              |           |
|--|----------------------------|------------------------|-------------------------|------------------------------|-----------|
| 11, INITIAL FINANCING STATEMENT FILE NUMBER: Same as   | s item 1a on Amendment fo  | rm                     |                         |                              |           |
| 1607656043 3/16/2016 CC IL Cook  |                            |                        |                         |                              |           |
| 12, NAME OF PARTY AUTHORIZING THIS AMENDMENT: Sa   | me as item 9 on Amendme    | nt form                |                         |                              |           |
| 12a. ORGANIZATION'S NAME   |                            |                        |                         |                              |           |
| Associated Bank, National Association  |                            |                        |                         |                              |           |
|  |                            |                        |                         |                              |           |
| OR 12b. INDIVIDUAL'S SURNAME   |                            |                        |                         |                              |           |
| 120. INDIVIDUAL S SURVANIE   |                            |                        |                         |                              |           |
| FIRST PERSONAL NAME  |                            |                        |                         |                              |           |
|  |                            |                        |                         |                              |           |
| ADDITIONAL NAME(SYINITIAL(S)   |                            | SUFFIX                 |                         |                              |           |
|  |                            |                        | THE ABOVE SI            | PACE IS FOR FILING OFFICE US | F ONLY    |
| 13. Name of DEBTOR on related financing statement (Name of   | a current Debtor of record | required for indexing  |                         |                              |           |
| one Debtor name (13a or 13b) (use exact, full na ne: do no   |                            |                        |                         |                              |           |
| 13a. ORGANIZATION'S NAME   | ) .                        |                        |                         |                              |           |
| B.L. DOWNEY COMPANY LLC  | 78                         |                        |                         |                              |           |
| OR 13b. INDIVIDUAL'S SURNAME   | FIRST                      | PERSONAL NAME          |                         | ADDITIONAL NAME(S)INITIAL(S) | SUFFIX    |
|  |                            |                        |                         |                              |           |
| Secured Party Name and Address: Associated Bank, National Association - 525 West National Asso |                            | 17. Descripti          | ion of real estate:     |                              |           |
| covers timber to be cut covers as-extracted colla  16. Name and address of a RECORD OWNER of real estate de (if Debtor does not have a record interest):   | <del></del>                |                        | XHIBIT "A"<br>A PART HE | ATTACHED HERE<br>EREOF.      | AND       |
| ·  |                            |                        |                         |                              |           |
|  |                            | Parcel<br>15-16-       |                         | 00 AND 15-16-420             | -005-0000 |
| 18, MISCELLANEOUS; 65364185-IL-31 20687 - ASSOCIATED BAN   | JK . CO Associated Bank    | , National Association | File with: Cook, IL     | 31013 30868915953            |           |

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#### EXHIBIT A

### LEGAL DESCRIPTION

THAT PART OF LOT 16 LYING WEST OF THE WEST RIGHT OF WAY LINE OF INDIANA HARBOR BELT RAILROAD COMPANY (EXCEPT THAT PART TAKEN FOR ROOSEVELT ROAD) IN SCHOOL TRUSTEE'S SUBDIVISION OF SECTION 16, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

COMMONLY KN'OV/N AS 2101-2025 GARDNER ROAD, BROADVIEW, IL 60155

PINS 15-16-420-004-0000 (ND) 15-16-420-005-0000