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UCC FINANCING STATEMENT AMENDI	MENT		*1521517101	
A. NAME & PHONE OF CONTACT AT FILER (optional)			Doc# 1821517101 Fe	ee ≇42.00
CSC 1-800-858-5294 B. E-MAIL CONTACT AT FILER (optional)	••••		RHSP FEE:\$9.00 RPRF FEE	: \$1.00
SPRFiling@cscglobal.com			KAREN A.YARBROUGH	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)			COOK COUNTY RECORDER OF	DEEDS
1500 78944 CSC	╗		DATE: 08/03/2018 03:09	
801 Adlai Stevenson Drive Springfield, IL 6270?				
Opinigheid, it 02707	Filed In: Illinois (Cook)			
	`		ACE IS FOR FILING OFFICE USE	
a. INITIAL FINANCING STATEMENT F LE 1 UMBER 0431533047 01/10/2004	11	(or recorded) in the REA	MENT AMENDMENT is to be filed [for LESTATE RECORDS Idendum (Form UCC3Ad) and provide Debt	
. TERMINATION: Effectiveness of the Financing Statement identical Statement	ified above is terminated wit	th respect to the security interes	est(s) of Secured Party authorizing this	s Termination
ASSIGNMENT (full or partial): Provide name of A sig. ee in iter For partial assignment, complete items 7 and 9 and 21st in a cate a		Assignee in item 7c <u>and</u> name	of Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statemer (ide continued for the additional period provided by applicable law	en fied above with respect to	o the security interest(s) of Sec	cured Party authorizing this Continuati	ion Statement is
PARTY INFORMATION CHANGE:	0		 	
	Check on an these three box		me: Complete item — DELETE name:	Give record name
This Change affects Debtor of Secured Party of record	CHANG I name and/or ad item 6a or 6b; e item 7a	or 7b <u>and</u> item 7c7a or 7b	and item 7c DELETE hame.	
CURRENT RECORD INFORMATION: Complete for Party Information Com	tion Change - pr vide only <u>or</u>	<u>ne</u> name (6a or 6b)		
R 66. INDIVIDUAL'S SURNAME	FIRST PERSONA	LNAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or Pa [7a. ORGANIZATION'S NAME]	inty Information Change - provide on	ly <u>one</u> name (7a or 7b) (exact, full n	arme; do not omit, modify, or abbreviate any part o	of the Debtor's name)
R 75. INDIVIDUAL'S SURNAME		CV	7	
		· ·	T /	
INDIVIDUAL'S FIRST PERSONAL NAME		•	TÓ	
INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			T'S Ox	SUFFIX
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	CITY		STATE POSTAL COUE	COUNTRY
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) : MAILING ADDRESS			, C	COUNTRY
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) : MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes:	CITY ADD collateral	DELETE collateral	, C	COUNTRY
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INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) : MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral	, C	COUNTRY
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) : MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING	ADD collateral THIS AMENDMENT: Pro	ovide only <u>one</u> name (9a or 9b) (RESTATE covered collateral	COUNTRY USA ASSIGN collateS
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) : MAILING ADDRESS : COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and	ADD collateral THIS AMENDMENT: Proprovide name of authorizing	ovide only <u>one</u> name (9a or 9b) (RESTATE covered collateral	COUNTRY USA ASSIGN collateS
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) : MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING	ADD collateral THIS AMENDMENT: Proprovide name of authorizing	ovide only <u>one</u> name (9a or 9b) (RESTATE covered collateral	COUNTRY USA ASSIGN collateS
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) : MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: NAME of SECURED PARTY of RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and	ADD collateral THIS AMENDMENT: Proprovide name of authorizing	wide only <u>one</u> name (9a or 9b) (Debtor	RESTATE covered collateral	COUNTRY USA ASSIGN collateS

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UCC FINANCING STATEMENT AMENDMENT ADDENDUM

INITIAL FINANCING STATEMENT FILE NUMBER: \$	Same as item 1a on A	mendment form		
NAME OF PARTY AUTHORIZING THIS AMENDMEN	T: Same as item 9 o	on Amendment form		
12a. ORGANIZATION'S NAME				
Prudential Insurance Company of Am	erica ————			
12b, INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INITIAL(3)		SUFFIX		
, ,			THE ABOVE SPACE IS FOR FILING OFFICE	USE ONLY
Name of DEBTOR on related financing statement (Na one Debtor name (13a or 13b) (use exact, full name do not de-				13): Provide on
13a. ORGANIZATION'S NAME)		1	
13b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	<u> </u>			
		S	ADDITIONAL NAME(S)/INITIAL(S)	

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Exhibit A ' LEGAL DESCRIPTION OF LAND

Lots 1, 2 and 3 (except the South 40.20 feet of the East 27.33 feet thereof) in the subdivision of the South half of Block 9 in Canal Trustee's Subdivision of the fractional quarter of Section 3, Township 39 North, also:

Lots 4 and 5 in the subdivision of the North half of Block 9 in Canal Trustee's Subdivision of the fraction at or arter of Section 3, Township 39 North, Range 14 East of the Third Principal Meridian in Cook County, Illinois.

Permanent index numbers; 17-03-206-002-0000 17-03-206-003-0000 17-03-206-004-0000 17-03-206-005-0000