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UCC FINANCING STATEMENT AMENDMEN FOLLOW INSTRUCTIONS	Т	מ	0c# 18242	1824217042* 17042 Fee	\$42.00
A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294		1		0 RPRF FEE: S	
B. E-MAIL CONTACT AT FILER (optional)		1	AREN A.YARBR		
SPRFiling@cscglobal.com				ECORDER OF DE	EDS
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		1		018 02:23 PM	
CSC 801 Adlai Stevenson Drive Springfield, IL 62707	d In: Illinois		<u></u>	uga ganangan e e e	
	(Cook)	THE ABOVE SPA	CE IS FOR FILL	NG OFFICE USE	ONI Y
1a. INITIAL FINANCING STATEMENT FE N JMBER	1	b. 7 This FINANCING STATE	MENT AMENDME	NT is to be filed [for	
1815712005 06/06/2018		(or recorded) in the REAI Filer. <u>attach</u> Amendment Ad	L ESTATE RECOR Idendum (Form UCC	RDS 3Ad) <u>and</u> provide Debto	r's name in item 13
2. TERMINATION: Effectiveness of the Financin', Statement identified above Statement	ve is terminated w	ith respect to the security intere	est(s) of Secured F	arty authorizing this	Termination
3. ASSIGNMENT (full or partial): Provide name of A signae in item 7a or 7 For partial assignment, complete items 7 and 9 and all indicate affected of	b, <u>and</u> address of collateral in item 8	Assignee in item 7c and name of	of Assignor in item	9	
4. CONTINUATION: Effectiveness of the Financing Statemer, identified at continued for the additional period provided by applicable law	oove with respect	to the security interest(s) of Sec	cured Party author	izing this Continuation	on Statement is
5. PARTY INFORMATION CHANGE:) ,				
	er, these three bo		me: Complete item	DELETE name:	Give record name
		a or 7b <u>and</u> item 7c . 7a or 7b.	, <u>and</u> item 7c	to be deleted in i	tem 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Chan 6a. ORGANIZATION'S NAMEMIdCap Financial Trust, as Age		name (6a or 6b)			
Wildoup Financial Fract, as Age					
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL VAM I	ADDITIONAL NA	ME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information		nly <u>one</u> name (7a or 7h), use exact, full na	ame; do not omit, modif	y, or abbreviate any part of	the Debtor's name)
7a. ORGANIZATION'S NAMEMIdCap Funding VII Trust, as A	gent	C/2			
OR 7b. INDIVIDUAL'S SURNAME		<u> </u>			···
			- /		
INDIVIDUAL'S FIRST PERSONAL NAME			'V		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			$-\Theta$	Sc.	SUFFIX
7c. MAILING ADDRESS 7255 Woodmont Avenue, Suite 200	CITY		STATE POST	AL COUE	COUNTRY
7255 Woodmont Avenue, Suite 200	Bethesda		MD 208		USA
8. COLLATERAL CHANGE: Also check one of these four boxes: ADI) collateral	DELETE collateral	RESTATE covered	collateral A	SSIGN collateral
Indicate collateral:	_			_	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AI	MENDMENT: Pr	ovide only <u>one</u> name (9a or 9b) (a	name of Assignor, i	f this is an Assignme	nt)
· · · · · · · · · · · · · · · · · · ·	name of authorizing	g Debtor			
9a. ORGANIZATIONS NAME MIDCap Financial Trust, as Age	nt				
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIONAL NA	ME(S)/INITIAL(S)	SUFFIX
	DAN' 5 ****	AO TOUGTES !:=	A DED SUE	4000 415	
10. OPTIONAL FILER REFERENCE DATA: Debtor; WEST SUBUR KNOWN AS	RAN RANK	, AS TRUSTEE U/T/	A DTD 3/15	I IAQQ AND	1480 31107



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UCC FINANCING STATEMENT FOLLOWINSTRUCTIONS				
11. INITIAL FINANCING STATEMENT FILE NUMB 1815712005 06/06/2018	BER: Same as item 1a on Amendment	form		
12. NAME OF PARTY AUTHORIZING THIS AMEN	DMENT: Same as item 9 on Amendm	ent form		
MidCap Financial Trust, as Agent	t			
OR 12b. INDIVIDUAL'S SURNAME	<u> </u>			
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INTITAT(S)	-	SUFFIX	A DOME OD LOT IN FOR FILING OFFICE	uce on v
13. Name of DEBTOR on related financing state	ent (Name of a current Debtor of recor		ABOVE SPACE IS FOR FILING OFFICE as only in some filing offices - see Instruction item	
one Debtor name (13a or 13b) (use exact, full name 13a. ORGANIZATION'S NAME				
OR 13b. INDIVIDUAL'S SURNAME	FIRST PE	ERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral)				
		ERSONAL NAME	OK OK	

18. MISCELLANEOUS:
*Secured Party may be contacted at the address above c/o MidCap Financial Services, LLC, as servicer.

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(Schaumburg)

EXHIBIT A

LEGAL DESCRIPTION

Lot 16 in Lexington Square Subdivision, being a subdivision in the Northeast 1/4 of Section 27, Township 41 North, Range 10, east of the third principal meridian, according to the Plat thereof recorded August 23, 1990 as document 90411700 and certificate of correction thereof recorded December 10, 1990 as document 90598723, in Cock County, Illinois.

975 Roselle Road, Schaumburg, IL 60193 07-27-201-039