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UCC FINANCING STATEMENT AMENDMENT	ucc	FINANCING	STATEMENT	AMENDMENT
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FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)	
Frederick C.C. Boyd, III, Esq. (404) 233-7000	
B. E-MAIL CONTACT AT FILER (optional)	
fcb@mmmlaw.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Morris, Manning & Martin, LLP	\neg
1600 Atlanta Financial Center	
3343 Peachtree Road, NE	
Atlanta, GA 30325	
Attention: Frederick C.C. Boyd, III, Esq.	

19274198619

¹Doc# 1827410061 Fee \$44.25

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

KAREN A.YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 10/01/2018 01:36 PM PG: 1 OF 3

3343 Peachtree Road, NE		
3343 I Cachu ce Ruau, INE		
Atlanta, GA 3.325	, i	
Attention: Frederick C.C. Boyd, III, Esq.	 	
	THE ABOVE SPACE IS FOR FILING OFFICE USE O	ONLY
A. INITIAL FINANCING STATEMENT FI'LE NUMBER	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for it	record)
43641102 Filed 12/12/2014	(or recorded) in the REAL ESTATE RECORDS Filer, attach Amendment Addendum (Form UCC3Ad) and provide Debtor	r's name in item 13
TERMINATION: Effectiveness of the Financing Statement identified above is termini Statement	ated with respect to the security interest(s) of Secured Party authorizing this	Termination
ASSIGNMENT (full or partial): Provide name of Ar signee in item 7a or 7b, and address For partial assignment, complete items 7 and 9 and other in cate affected collateral in		
CONTINUATION: Effectiveness of the Financing Statemer , iden fied above with recontinued for the additional period provided by applicable law	spect to the security interest(s) of Secured Party authorizing this Continuatio	n Statement is
PARTY INFORMATION CHANGE:		
Check one of these two boxes: AND Check on of these two boxes:		
This Change affects Debtor or Secured Party of record CHA!.G: name at item 6a x 6b; P	nd/or address: Complete ADD name: Complete item DELETE name: Complete item To to be deleted in it	Give record name em 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information Change - pr. vide	- William	
6a. ORGANIZATION'S NAME		
Tri City Foods of Illinois, Inc.	9/,	
9	RSONAL JAM : ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - p	rovide only one have (7a or 7b)	the Debter's name)
7a. ORGANIZATION'S NAME		are Debter a Harrey
7a. ORGANIZATION'S NAME	C/	me Deutor's Harrey
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME	C'/Q	are Debtor's Harrey
7a. ORGANIZATION'S NAME	C/ _Q / _Z /	are Deuter's Hanney
7a. ORGANIZATION'S NAME	C/ ₆ / ₄ ,	are Deuter's Hanrey
78. ORGANIZATION'S NAME 75. INDIVIDUAL'S SURNAME	75	wie Seutu s namey
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME	C/6/4/5	SUFFIX
76. ORGANIZATION'S NAME 75. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME	- C/O/X-	
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	STATE POSTAL CADE	SUFFIX
78. ORGANIZATION'S NAME 75. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	C/O/7+/ O/5:	
78. ORGANIZATION'S NAME 75. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) . MAILING ADDRESS CITY	STATE POSTAL/CODS	SUFFIX
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS CITY COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral	STATE POSTAL COLS	SUFFIX
78. ORGANIZATION'S NAME 75. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) . MAILING ADDRESS CITY	STATE POSTAL/CODS	SUFFIX
78. ORGANIZATION'S NAME 75. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS CITY COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral	STATE POSTAL/CODS	SUFFIX
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78. ORGANIZATION'S NAME 75. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS CITY COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral	STATE POSTAL/CODS	SUFFIX

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

WELLS FARGO BANK, NATIONAL ASSOCIATION, as Administrative Agent

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S) SU

10. OPTIONAL FILER REFERENCE DATA:

Cook County, IL Filing

(CID No. 000026722)

(Store No. 1083)

MM&M File No.18263/100661

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	NITIAL FINANCING STATEMENT FILE NUMBER: SI	iame as item 1a on A	Amendment form			
	NAME OF PARTY AUTHORIZING THIS AMENDMENT	T: Same as item 9	on Amendment form			
	12a. ORGANIZATION'S NAME					
	WELLS FARGO BANK, NATIONA	AL ASSOC	IATION,			
0R	as Administrative Agent					
•	12b. INDIVIDUAL'S SURNAME		ŀ			
	FIRST PERSONAL NAME					
	TINOT FEROOMAL NAME					
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX			
				THE ABOVE SPACE IS FOR FILIN	IG OFFICE US	SE ONLY
13.	Name of DEBTOR on related financing scatement (Name	ime of a current Det	otor of record required for indexing			
	one Debtor name (13a or 13b) (use exact, full nome do not o					~,,
	13a. ORGANIZATION'S NAME					
٦.	Tri City Foods of Illinois, Inc.	<u> </u>				
OR	13b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)	/INITIAL(S)	SUFFIX
14.	ADDITIONAL SPACE FOR ITEM 8 (Collateral):					
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			4 County	C/0/4/5 Ox		
			County	C/0/4/50/5		
			County	C/O/H/S O/M/		
			County	Clark's Office		
			County	Clory's Original		
5	his FINANCING STATEMENT AMENDMENT:					
15.	his FINANCING STATEMENT AMENDMENT:		17. Description	of real estate:		
6.	covers timber to be cut covers as-extracted collate lame and address of a RECORD OWNER of real estate described.	eral [☑] is filed a	17. Description			
16.	covers timber to be cut covers as-extracted collate	eral [☑] is filed a	17. Description	of real estate:		
16.	covers timber to be cut covers as-extracted collate lame and address of a RECORD OWNER of real estate described.	eral [☑] is filed a	17. Description	of real estate:		
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16.	covers timber to be cut covers as-extracted collate lame and address of a RECORD OWNER of real estate described.	eral [☑] is filed a	17. Description	of real estate:		

18, MISCELLANEOUS:

1827410061 Page: 3 of 3

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Unit: Store No. 1083 1540 E Northwest Hwy Palatine, IL 60074 Cook County

EXHIBIT "A"

DESCRIPTION OF REAL ESTATE

EXHIBIT A

LEGAL DESCRIPTION

Parcel 1: Lots 77 and 78 in Pobert Bartlett's Arlington Crest Estates, being a Subdivision of part of the Southeast 1/4 of Section 24, and part of the Northeast 1/4 of Section 25, Township 42 North, Range 10 East of the Third Principal Meridian in Cook County, Illinois.

Parcel 2: Lot 76 in Robert Bartlett's Assington Crest Estates, a Subdivision of part of the Southeast 1/4 of Section 24 and part of the Northeast 1/4 of Section 25, Township 42 North, Range 10, East of the Third Principal Merid an, in Cook County, Illinois.

Permanent Index Numbers: 02-25-203-002

02-25-203-003 02-25-203-004

02-25-203-002-0000, 02-25-203-003-0000, 02-25 203-004-0000