## **UNOFFICIAL COPY**

		,		`
JCC FINANCING STATEMENT AMENDM	· IFNT		∞1327419872 <b>*</b>	
OLLOW INSTRUCTIONS		'Doc# 182	7410072 Fee \$44.25	
A. NAME & PHONE OF CONTACT AT FILER (optional) Frederick C.C. Boyd, HI, Esq. (404) 233-7000			9.00 RPRF FEE: \$1.00	:
B. E-MAIL CONTACT AT FILER (optional)		KAREN A YA		
fcb@mmmlaw.com			Y RECORDER OF DEEDS	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		COOK COUNT	01:41 DM PG: 1 (	OF 3
Morris, Manning & Martin, LLP 1600 Atlanta Financial Center	$\neg$	DATE: 10/0	1/2018 01:41 PM PG: 1 (	
3343 Peachtree Road, NE		• • • • • • • • • • • • • • • • • • • •		
Atlanta, GA 2.325				
Attention: Frederick C.C. Boyd, III, Esq.				
			ACE IS FOR FILING OFFICE USE	
a. INITIAL FINANCING STATEMENT FILE NUMBER  1434641115 Filed 12/12/2014	1b.	This FINANCING STAT (or recorded) in the RE	EMENT AMENDMENT is to be filed (fo AL ESTATE RECORDS	or record]
			Addendum (Form UCC3Ad) <u>and</u> provide Deb	
. TERMINATION: Effectiveness of the Financian Statement identifies Statement				is Termination
ASSIGNMENT (full or partial): Provide name of A sig. ee in item 7 For partial assignment, complete items 7 and 9 and also in cate affections.	ected collateral in item 8	********		
CONTINUATION: Effectiveness of the Financing Statemer (iden continued for the additional period provided by applicable law.	fied above with respect to I	the security interest(s) of S	ecured Party authorizing this Continua	tion Statement is
PARTY INFORMATION CHANGE:		- to		
Check one of these two boxes.	ec.: or ਭੂਵ these three boxes a CHANG : name and/or addr	ess: Complete ADD n	ame: Complete item DELETE name	: Give record name
	item 6a x 6b; ectivem 7a o		b, and item 7c to be deleted in	item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information  6a ORGANIZATION'S NAME	n Change - privide only one	name (6a or 6b)		
Tri City Foods of Illinois, Inc.	0,			
R 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	AM E	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	· ·	17,	, , , , , , , , , , , , , , , , , , , ,	
CHANGED OR ADDED INFORMATION: Complete for Assignment or Party	Information Change - provide only	one name (7a or 7b) (use exact, full	name; do not omit, modify, or abbreviate any part	of the Debtor's name)
7a. ORGANIZATION'S NAME				
R				•
7b. INDIVIDUAL'S SURNAME		C	h/ ·	_
			<u> </u>	
INDIVIDUAL'S FIRST PERSONAL NAME			'5	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
MAILING ADDRESS	CITY		STATE POSTAL COUR	COUNTRY
maino aboneso	Cirr		STATE POSTATOSON	COUNTRY
	<del></del>		<u> </u>	
COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN collateral
Indicate collateral:				٦
				P
				<u>'</u>
				S /
				a <i>A</i>
				IVI
NAME OF SECURED PARTY OF RECORD AUTHORIZING TH	HIS AMENIDMENT: D	de entrene name (0= == 01)	James of Angiones (State 1 1)	
	rovide name of authorizing D		(name of Assignor, if this is an Assignm	
9a. ORGANIZATION'S NAME				<u> </u>
WELLS FARGO BANK, NATIONAL	ASSOCIATIO!	N, as Administr	ative Agent	<u>۔۔۔۔</u>
96. INDIVIDUAL'S SURNAME	FIRST PERSONAL I	<u> </u>	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX 1
OPTIONAL FILER REFERENCE DATA:		<del></del>		<u> </u>
Cook County, IL Filing (CID No. 000026722	2) (Store No. 1-	455) MM&M	File No.18263/100661	
		<u> </u>		

1827410072 Page: 2 of 3

## **UNOFFICIAL COPY**

	C FINANCING STATEMENT AMENDMEN LOWINSTRUCTIONS	T ADDENDUM	,	
11. 1.	NITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on A 134641115 Filed 12/12/2014	Amendment form		
	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 of	on Amendment form	•	
	12a, ORGANIZATION'S NAME			
	WELLS FARGO BANK, NATIONAL ASSOC	IATION,		
OR	as Administrative Agent		·	
	12b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAME			
	ADDITIONAL NAME(S)/INI ;;,,L'(3)	SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE U	SE ONI V
13.	Name of DEBTOR on related financing sate lient (Name of a current Debone Debtor name (13a or 13b) (use exact, full name do not omit, modify, or abbr	otor of record required for indexing	ing purposes only in some filing offices - see Instruction item 1	
	13a. ORGANIZATION'S NAME	eviate any part of the Deotor's r	name); see instructions it name does not fit	
	Tri City Foods of Illinois, Inc.			
OR	13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
_			C/O/A/SO/Se.	
14.	ADDITIONAL SPACE FOR ITEM 8 (Collateral):	) /		
		4		
		4/2"		
			T'_	
			<i>S</i> –	
	•			
			Co	
			C	
15.1	nis FINANCING STATEMENT AMENDMENT:	17. Description	n of real estate:	-
	covers timber to be cut covers as-extracted collateral is filed a		ibit "A" attached hereto.	
	ame and address of a RECORD OWNER of real estate described in item 17 Debtor does not have a record interest):			
,				
18. N	ISCELLANEOUS:			

1827410072 Page: 3 of 3

## **UNOFFICIAL COPY**

Unit: Store No. 1455 1401 W. Fullerton Chicago, IL 60614 Cook County

EXHIBIT "A"

## **DESCRIPTION OF REAL ESTATE**

EXHIBIT "A" #

LOTS 1, 2, 3, 4 AND 5 IN SUB-BLOCK 2 OF SUBDIVISION BY THE EXECUTORS OF JOHN HIGH JR., OF THE BASE 1/2 OF BLOCK 15 IN THE SHEEFIELD ADDITION TO CHICAGO OF SECTIONS 29, 31, 33 AND 33, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE TRIRD PRINCIPAL MERIDAGE IN COOK COUNTY, ILLINOIS.

14-32-103-006-0000, 14-32-103-007-0000, 14-32-103-008-0000