

UNOFFICIAL COPY



Doc# 1827410088 Fee \$44.25

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

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 10/01/2018 01:49 PM PG: 1 OF 3

UCC FINANCING STATEMENT AMENDMENT

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)
fcbl@mmmlaw.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Morris, Manning & Martin, LLP
1600 Atlanta Financial Center
3343 Peachtree Road, NE
Atlanta, GA 30326
Attention: Frederick C.C. Boyd, III, Esq.

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
1434641109 Filed 12/12/2014

1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS
 Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. PARTY INFORMATION CHANGE:
 Check one of these two boxes: Debtor or Secured Party of record
 AND Check one of these three boxes to:
 CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c
 ADD name: Complete item 7a or 7b, and item 7c
 DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME
Tri City Foods of Illinois, Inc.

OR

6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (name exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME
 INDIVIDUAL'S FIRST PERSONAL NAME
 INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral
 Indicate collateral:

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

OR

9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

10. OPTIONAL FILER REFERENCE DATA:
Cook County, IL Filing (CID No. 000026722) (Store No. 1436) MM&M File No.18263/100661

S Y
 P 3
 S N
 M N
 SC Y
 E Y
 INT DA

UNOFFICIAL COPY

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form

1434641109 Filed 12/12/2014

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

12a. ORGANIZATION'S NAME

WELLS FARGO BANK, NATIONAL ASSOCIATION,**as Administrative Agent**

OR

12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see instruction item 13); Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see instructions if name does not fit

13a. ORGANIZATION'S NAME

Tri City Foods of Illinois, Inc.

OR

13b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

15. This FINANCING STATEMENT AMENDMENT:

 covers timber to be cut
 covers as-extracted collateral
 is filed as a fixture filing
16. Name and address of a RECORD OWNER of real estate described in item 17
(if Debtor does not have a record interest):

17. Description of real estate:

See Exhibit "A" attached hereto.

18. MISCELLANEOUS:

UNOFFICIAL COPY

Unit:

Store No. 1436
2814 East Higgins Rd.
Elk Grove, IL 60007
Cook County

EXHIBIT "A"

DESCRIPTION OF REAL ESTATELEGAL DESCRIPTION

That part of the South East quarter of Section 26 and North East quarter of Section 35, both in Township 41 North, Range 11 East of the Third Principal Meridian, described as follows: commencing at the North East corner of said Section 35, running thence South in center of road 35.31 feet; thence South 68 degrees West along the North line of School Lot 228.36 to center of road; thence North 41 degrees West along the center of road 201.63 feet; thence North 68 degrees East 372.24 feet to the East line of said Section 26 in center of road; thence South 170.28 feet to the point of beginning (except that part lying Northeasterly and Easterly of the Southwesterly and Westerly lines of Touhy Avenue, as widened and dedicated by plat recorded July 6, 1965, as Document 19516388 in Cook County, Illinois.

Commonly known as: 2814 East Higgins, Elk Grove Village, Illinois.

08-26-410-002-0000, 08-35-201-003-0000