INOFFICIAL C

Doc# 1831118137 Fee \$40.00

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

KAREN ALYARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 11/07/2018 02:17 PM PG: 1 OF 2

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS A, NAME & PHONE OF CONTACT AT FILER (optional) JOHN J. PHELPS B. E-MAIL CONTACT AT FILER (optional) JOHN J. PHELPS C. SEND ACKNOWLEDGMENT TO: (Name and Address) ROCKFORD LOCAL DEVELOPMENT CORP 120 W. STATE STREET, SUITE 306 ROCKFORD, IL 61101

	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
1a. INITIAL FINANCING STATEMENT FILE TUMBER 1411239066	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 inarting Statement identified above is terminal Statement	nated with respect to the security interest(s) of Secured Party authorizing this Termination				
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and add For partial assignment, complete items 7 and 9 and also include affected collateral in	ress of Assignee in item 7c <u>and</u> name of Assignor in item 9 i item 8				
4. CONTINUATION: Effectiveness of the Financing Stateme at idea tified above with recontinued for the additional period provided by applicable la /	espect to the security interest(s) of Secured Party authorizing this Continuation Statement is				
	three boxes to: and/or address: Complete ditem 7a or 7b and item 7c				
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - r ovide only one name (6a or 6b) 6a. ORGANIZATION'S NAME					
OR 6b. INDIVIDUAL'S SURNAME FIRST PI	ERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX				
7a. ORGANIZATION'S NAME	provide only one notice (7a or 7h) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)				
OR 7b, INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME	7,7				

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				
U.S. SMALL BUSINESS ADMINISTRATION					
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	

CITY

10, OPTIONAL FILER REFERENCE DATA:

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral

7c. MAILING ADDRESS

Indicate collateral:

ANDY'S FROZEN CUSTARD COUNTRYSIDE, LLC

International Association of Commercial Administrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

STATE

RESTATE covered collateral

POSTAL CODE

SUFFIX

COUNTRY

ASSIGN collateral

DELETE collateral

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UNOFFICIAL COPY

Exhibit A Legal Description of Property

LOT 22 (EXCEPT THE NORTH 36 FEET THEREOF) AND (EXCEPT THE SOUTH 16.00 FEET OF THE WEST 27.00 FEET THEREOF) IN STOUFFER'S SUBDIVISION OF THE SOUTH 1/2 OF THE NORTHEAST 1/4 (EXCEPT THE EAST 384.78 FEET OF THE SOUTH 417.06 FEET) IN SECTION 16, TOWNSHIP 38 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED MAY 31, 1922 AS DOCUMENT NUMBER 7521572, IN COOK COUNTY, ILLINOIS.

PIN #18-16-208-024-0000 Delth Of Colling Clerk's Office 5745 S. LaGrange Road, Countryside, 1L 60525