

Doc# 1832312078 Fee \$44.25

UC	C	FIN/	ANCING	STATEMENT	AMENDMENT

A. NAME & PHONE OF CONTACT AT FILER (optional)
Phone: (800) 331-3282 Fax: (818) 662-4141

B. E-MAIL CONTACT AT FILER (optional)
CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)
Lien Solutions
P.O. Box-29071
Glendale, CA 91209-9071

| Contact | C

RHSP FEE:\$9.00 RPRF FEE: \$1.00
KAREN A.YARBROUGH
COOK COUNTY RECORDER OF DEEDS

DATE: 11/19/2018 11:42 AM PG: 1 OF 3

Giendale, CA 91209-9071	ILIL			
1	FIXTURE			
File with: Cook, IL			IS FOR FILING OFFICE US	
a. INITIAL FINANCING STATEMF IT FILE NUMBER		 This FINANCING STATEME (or recorded) in the REAL E 	NT AMENDMENT is to be filed [fo	or record]
1830417051 10/31/2018 (:C L Cook			dum (Form UCC3Ad) and provide Debt	or's name in item 13
TERMINATION: Effectiveness of the Surviving Statement	nent identified above is terminated with	respect to the security interest(s) of	Secured Party authorizing this Te	ermination
ASSIGNMENT (<u>full</u> or partial): Provide name of Assig For partial assignment, complete items 7 and 9 <u>no</u> a			ignor în item 9	
. CONTINUATION: Effectiveness of the Financing State continued for the additional period provided by applica		he security interest(s) of Secured Pa	rrty authorizing this Continuation S	Statement is
. PARTY INFORMATION CHANGE:	C			
Check one of these two boxes:	AND Check ine of these three box			
This Change affects Debtor or Secured Party of reco	ord CF'ANCE name and/or a	ddress: Complete ADD name: a or 7b <u>and</u> item 7c 7a or 7b, <u>an</u>		Give record name item 6a or 6b
. CURRENT RECORD INFORMATION: Complete for Party	Information Change - provide only one	name (6a or 6b)		
6a. ORGANIZATION'S NAME		, ,		
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	L NAME A	ADDITIONAL NAME(SVINITIAL(S)	SUFFIX
		1/2		ŀ
	anni ar Darb, Information Change - provide anti-	an name (7a x 7b) (use award full name) do	and a mile an addition of a physicial to a my anatood the	a Dobtor's same
7a. ORGANIZATION'S NAME	tent or Party Information Change - provide only to	He Hallik (78) 70) (036 exact, lds Hallie, 00	to onic, mounty, or above state any part or the	e Debior's Hallie)
BAYVIEW LOAN SERVICING, LLC				
DR 7b. INDIVIDUAL'S SURNAME				
75. 1157/1507/20 501117/102		'Q'		
INDIVIDUAL'S FIRST PERSONAL NAME		——————————————————————————————————————	•	
INDIVIDUAL STIRST PERSONAL NAME			5	
INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S)	•		•	SUFFIX
7c. MAILING ADDRESS	CITY	} {	STATE POPTAL CODE	COUNTRY
4425 PONCE DE LEON BLVD 5TH FLOOR	CORAL GA	BLES	FL 3314	USA
COLLATERAL CHANGE: Also check one of these	four boxes: ADD collateral	DELETE collateral RES	STATE covered colland: al	ASSIGN collateral
Indicate collateral:				

		THIS AMENDMENT: Provide only one name	(9a or 9b) (name of Assignor, if this is an Assignme	ent) 📮	2
9a. ORGANIZATION'S N		and provide name of authorizing Debtor		<u> </u>	v
OR 96. INDIVIDUAL'S SURM	·	FIRST PERSONAL NAME	ADDITIONAL NAME(SYINITIAL(S)	SUFFIX 1	y
				<u>on</u>	y
10. OPTIONAL FILER REI 67255138	FERENCE DATA: Debtor Name: Hilha 400022235	ven LLC	400022235		Ź

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FOLLOW INSTRUCTIONS	ADDENDUM		
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Ameri	idment form	•	
1830417051 10/31/2018 CC IL Cook 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on A	man describé o ma		
12. NAME OF PARTY AUTHORIZING THIS AMENUMENT: Same as item 9 on A	menament form		
South End Capital Corporation			
OR 12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)INITU L(S)	SUFFIX		
13. Name of DEBTOR on related financing പറ്റ് ent (Name of a current Debtor of	of record required for indexing pu	THE ABOVE SPACE IS FOR FILING OFFICE U	
one Debtor name (13a or 13b) (use exact the name; do not omit, modify, or a			
13a. ORGANIŽATION'S NAMĖ Hilhaven LLC			
OR 13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
AL APPETIONAL OPAGE FOR ITEMA (O. W. v. v.)			
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): Debtor Name and Address:			
Hilhaven LLC - 1041 N California Ave , Chicago, IL 60622)/		
Secured Party Name and Address:	T_		
South End Capital Corporation - 4515 White Oak Place, Encino, C	A 917 16	AADI 50 51 00440	
BAYVIEW LOAN SERVICING, LLC - 4425 PONCE DE LEON BLV	D 51H FLOOR , CORAL G	GABLES, FL 33146	
	$^{T}\mathcal{O}_{X}$		
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		4,	
		GABLES, FL 33146	
			•
		U _S	
15. This FINANCING STATEMENT AMENDMENT:	i i	n of real estate:	
covers timber to be cut covers as-extracted collateral is filed 16. Name and address of a RECORD OWNER of real estate described in item 17	as a fixture filing see atta	ached	
(if Debtor does not have a record interest):			
	Parcel I		
	16-01-4	08-008-0000	
	1		
18. MISCELLANEOUS: 67255138-IL-31 15795 - BAYVIEW SERVICING South	End Capital Corporation Fil	lle with: Cook, IL 400022235 400022235	

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Exhibit A

The following described Real Estate situated in the County of Cook, State of Illinois, the following described Real Estate, to-wit:

LOT 26 IN BLOCK 1 IN WATRISS SUBDIVISION OF THE SOUTH 1/2 OF THE NORTHWEST 1/4 OF THE SOUTHEAST 1/2 SECTION 1, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY ILLINOIS.

Being and all the same premises conveyed in Deed Document No. 1531445039.

Parcel Id#: 16-01-408-008-0000

Cook County Clerk's Office Property Address: 1041 North California Avenue, Chicago, IL 60622.

C-18-3090-IL/18