RHSP FEE: \$9.00 RPRF FEE: \$1.00 KAREN A. YARBROUGH

COJK COUNTY RECORDER OF DEEDS

DATE: 11/19/2018 10:41 AM PG: 1 OF 3

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) 15795 - BAYVIEW Lien Solutions 67292558 P.O. Box 29071 ILIL Glendale, CA 91209-9071 **FIXTURE** rile with: Cook County Recorder, IL 1a. INITIAL FINANCING STATEME'AT FILE NUMBER

**UCC FINANCING STATEMENT AMENDMENT** 

**FOLLOW INSTRUCTIONS** 

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] 2.

0400947213 1/9/2004 CC IL Jook County Recorder		Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13				
2. TERMINATION: Effectiveness of the Functing Statement identified a Statement	bove is terminated with respect to the secu	urity interest(s) of Secured Party authorizing this T	ermination			
3. ASSIGNMENT (full or partial): Provide name (A signee in item 7a o For partial assignment, complete items 7 and 9 : also indicate affe		nnd name of Assignor in item 9				
4. CONTINUATION: Effectiveness of the Financing Stat. me.it i entified continued for the additional period provided by applicable .aw	above with respect to the security interest(	(s) of Secured Party authorizing this Continuation	Statement is			
5. PARTY INFORMATION CHANGE:	_					
Check one of these two boxes:	ck ine of these three boxes to:					
	of ANGE name and/or address: Complete item 6' or ob; and item 7a or 7b and item 7c	ADD name: Complete item 7a or 7b, and item 7c DELETE name to be deleted in	: Give record name nitem 6a or 6b			
6. CURRENT RECORD INFORMATION: Complete for Party Information Ch	ange - provide only one name (6a or 6b)					
6a, ORGANIZATION'S NAME	C					
OR 66. INDIVIDUAL'S SURNAME	FIRST PERSON/ NAME	ADDITIONAL NAME(SYINITIAL(S)	SUFFIX			
MARTINEZ .	MARIO	CESAR				
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informa 7a. ORGANIZATION'S NAME	ation Change - provide only one namy (7a x 7b) (use	e exact, full name; do not omit, modify, or abbreviate any part of t	he Debtor's name)			
b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)		Oxa	SUFFIX			
7c. MAILING ADDRESS	СІТУ	STATE POSTAL CODE	COUNTRY			
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral DELETE collate	eral RESTATE covered collateral	ASSIGN collateral			
Indicate collateral:						

	ა <u>.</u>		<u> </u>	
	NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor	a or 9b) (name of Assignor, if this is an Assignment)	P	_3
ΛP	9a. ORGANIZATION'S NAME INTERBAY FUNDING, L.L.C.			ì
	9b, INDIVIDUAL'S SURNAME FIRST PERSONAL NAME	ADDITIONAL NAME(SYINITIAL(S) SL	UFF N	
10.0	O OPTIONAL FILER REFERENCE DATA: Debtor Name: MARTINEZ MARIO CESAR		100	ナノ

67292558 9900

Prepared by Lien Solutions, P.O. 8ox 29074 Glendale, CA 91209-9071 Tel (800) 331,32

200023455



## **UNOFFICIAL COPY**

## **UCC FINANCING STATEMENT AMENDMENT ADDENDUM**

FOLI	OW INSTRUCTIONS							
	ITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1 0947213 1/9/2004 CC IL Cook County Record							
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT; Same as item 9 on Amendment form								
-[	12a. ORGANIZATION'S NAME	*						
	INTERBAY FUNDING, L.L.C.							
OR	:							
	12b. INDIVIDUAL'S SURNAME							
	FIRST PERSONAL NAME							
	ADDITIONAL NAME(SYINITY _(S)		SUFFIX					
	<u> </u>			THE ABOVE SPACE IS FOR FILING OFFICE USE	ONLY			
	lame of DEBTOR on related financing scatcment (Name of a curre one Debtor name (13a or 13b) (use exact, tet name; do not omit, i				13): Provide only			
ſ	13a. ORGANIZATION'S NAME							
OR	13b. INDIVIDUAL'S SURNAME MARTINEZ	FIRST PERSO	NAL NAME	ADDITIONAL NAME(SYINITIAL(S) CESAR	SUFFIX			
		107440		020,111	<u>i</u>			
Deb	nDDITIONAL SPACE FOR ITEM 8 (Collateral): for Name and Address: RTINEZ, MARIO CESAR - 542 NORTH ARTESIAN ,	CHICAGO II 60622						
		571167136, 11, 00022						
Seci	ired Party Name and Address: ERBAY FUNDING, L.L.C 4425 PONCE DE LEON B	LVD. 5TH FLC JR, D	ORAL GABL	ES, FL 33146				
			().					
			Y/)x					
	INTERBAY FUNDING, L.L.C 4425 PONCE DE LEON BLVD. 5TH FLC JR, CORAL GABLES, FL 33146							
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15. 1	his FINANCING STATEMENT AMENDMENT:		17. Description	on of real estate:				
40.1		is filed as a fixture filing		TTACHED				
	lame and address of a RECORD OWNER of real estate described Debtor does not have a record interest):	on tem 17	PIN - 1	6-01-401-012-0000				
				•				
18 8	IISCELLANEOUS; 67292558-IL-550 15795 - BAYVIEW SERVICING	INTERBAY FUNDING, L	.L.C.	File with: Cook County Recorder, IL 9900 200023455				

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## **UNOFFICIAL COPY**

LOT 9 IN BLOCK 1, IN WETHERBEE AND GREGORY'S SUBDIVISION OF THE NORTHWEST 1/2 (EXCEPT THE EAST 100 FEET) OF THE NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 1, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN NUMBER: 16-01-401-012-0000

CKA: 2629 WEST DIVISION, CHICAGO, ILLINOIS 60622

COOK COUNTY RECORDER OF DEEDS

COOK COUNTY A

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