## **WNOFFICIAL COPY**

## UCC FINANCING STATEMENT AMENDMENT

**FOLLOW INSTRUCTIONS** 

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@woltu	erskluwer.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	20139 - HINSDALE BANK
Lien Solutions	68557168
P.O. Box 29071 Glendale, CA 91209-9071	ILIL
	FIXTURE
File with: Cook, IL	

*1905317024 <b>*</b>				

Doc# 1905317024 Fee \$42,00

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

EDWARD M. HOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 02/22/2019 10:26 AM PG: 1 OF 3

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1422415015 8/12/2014 CC IL Cook	(or recorded) in the Filer. attach Amend	(or recorded) in the REAL ESTATE RECORDS  Filer. attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13		
TERMINATION: Effectiveness of the Financing Statement     Statement	identified above is terminated with respect to the security in	sterest(s) of Secured Party authorizing this Termination		
ASSIGNMENT (full or partial): Provide name of Assigns e     For partial assignment, complete items 7 and 9 and also it	in ite a 7a or 7b, <u>and</u> address of Assignee in item 7c <u>and</u> na naicate affected collateral in item 8	me of Assignor in item 9		
CONTINUATION: Effectiveness of the Financing Stateme continued for the additional period provided by applicable		Secured Party authorizing this Continuation Statement is		
PARTY INFORMATION CHANGE:     Check <u>one</u> of these two boxes:     This Change affects		ADD name: Complete item DELETE name: Give record name are to be deleted in item 6a or 6b		
CURRENT RECORD INFORMATION: Complete for Party Info     6a. ORGANIZATION'S NAME	rmation Change - provide only <u>ne</u> name (6a or 6b)			
OR 6b. INDIVIDUAL'S SURNAME SALIM	FIRST PERSONAL NAME MUNTHER	ADDITIONAL NAME(SYINITIAL(S) SUFFIX		
7. CHANGED OR ADDED INFORMATION: Complete for Assignment of Tax. ORGANIZATION'S NAME	or Party Information Change - provide only one name (7a or 7b) ( se exac,	fr'il name; do not omit, modify, or abbreviate any part of the Debtor's name)		
OR 7b. INDIVIDUAL'S SURNAME		Ti		
INDIVIDUAL'S FIRST PERSONAL NAME	<del>.</del>	O <sub>x</sub>		
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)		SUFFIX		
7c. MAILING ADDRESS	CITY	STATE POSTAL COD COUNTRY		
COLLATERAL CHANGE: Also check one of these four indicate collateral:	r boxes: ADD collateral DELETE collateral	RESTATE covered collateral  ASSIGN collateral  S  P 3		
		S <u>N</u> M <u>N</u>		
NAME OF SECURED PARTY OF RECORD AUTHOR     If this is an Amendment authorized by a DEBTOR, check here	IZING THIS AMENDMENT: Provide only one name (9a o	or 9b) (name of Assignor, if this is an Assignment)		
9a. ORGANIZATION'S NAME SUBURBAN BANK & TRUST		E_ <u>y</u>		
OR 96. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(SYINITIAL(S) SUFFIX TO		

Prepared by Lien Solutions, P.O. Box 29071, Glendale, CA 91209-9071 Tel (800) 331-3282

15724

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: SALIM, MUNTHER

SALIM

68557168

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UCC FINANCING STATEMENT AMENDM FOLLOW INSTRUCTIONS	ENT ADDENDUM		
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a 1422415015 8/12/2014 CC IL Cook	on Amendment form		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as iter	m O on Amendment form		
12a. ORGANIZATION'S NAME	m 9 on Amendment form		
SUBURBAN BANK & TRUST			
OR			
12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)INITIAL(S)	SUFFIX		
		THE ABOVE SPACE IS FOR FILING OFFICE US	E ONLY
13. Name of DEBTOR on related financing statement, Name of a current one Debtor name (13a or 13b) (use exact, full name 35 not omit, mo			13): Provide only
13a. ORGANIZATION'S NAME			
OR 13b. INDIVIDUAL'S SURNAME SALIM	FIRST PERSONAL NAME MUNTHER	ADDITIONAL NAME(SYINITIAL(S)	SUFFIX
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):	MOTTFIER		
Secured Party Name and Address: SUBURBAN BANK & TRUST - 150 BUTTERFIELD ROAD,	ELMHURST, IL 60126	2/0/4/5 O/5/C	
15. This FINANCING STATEMENT AMENDMENT:	17. Description of	CV	

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SALIM 15724

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SUBURBAN BANK & TRUST

18. MISCELLANEOUS: 68557168-IL-31 20139 - HINSDALE BANK & TRUS

1905317024 Page: 3 of 3

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**Debtor: SALIM, MUNTHER** 

**Exhibit for Real Estate** 

17. Description of real estate:

Continued

AVENUE, MIDLOTHIAN, IL 60445.
Real Property Tax Identification Number is 28-10-228-010-0000.

Parcel ID: 28-10-228-010-0000