ეoc# 1906628006 Fee \$50.00

#### **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@wolte	erskluwer.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	31153 - CAPITAL ONE
Lien Solutions P.O. Box 29071	68729876
Glendale, CA 91209-9071	ILIL
	FIXTURE 1
File víth: Ćook, IL	

RHSP	FEE:	S9.00	RPRF	FEE:	\$1.00	
EDHAF	≀D M.	HOOD	Y			
i						

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141			COOK COUNTY RECORDER	OF DEEDS	
B. E-MAIL CONTACT AT FILER (optional)  CLS-CTLS*_Glendale_Customer_Service@we	olterskluwer.com		DATE: 03/07/2019 12:2	23 PH PG: 1 OF 7	
C. SEND ACKNOWLEDGMENT TO: (Name and Addres	is) 31153 - CAPITAL ONE	1			
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	68729876 ILIL FIXTURE				
File with: Cook, IL		THE ABOVE SPA	CE IS FOR FILING OFFICE US	SE ONLY	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 1417618044 6/25/2014 CC L/Cook		(or recorded) in the REA	MENT AMENDMENT is to be filed [filed filed	<u>-</u>	
TERMINATION: Effectiveness of the Fir and ng Statement	ent identified above is terminated with	respect to the security interest(s	) of Secured Party authorizing this To	ermination	
ASSIGNMENT (full or partial): Provide name or A significant for partial assignment, complete items 7 and 9 and all all assignments.			ssignor in item 9		
CONTINUATION: Effectiveness of the Financing State continued for the additional period provided by applications.		he security interest(s) of Secured	Party authorizing this Continuation (	Statement is	
5. PARTY INFORMATION CHANGE:			•		
Check <u>one</u> of these two boxes:	AND Check and of these three box	ddress: Complete ADD nan		: Give record name	
This Change affects Debtor or Secured Party of reco	rd item oa Ch; <u>and</u> item 7	a or 7b and item 7c 7a or 7b,	and item 7c to be deleted in	item 6a or 6b	
6. CURRENT RECORD INFORMATION: Complete for Party I	Information Change - provide only ne	name (6a or 6b)			
6a. ORGANIZATION'S NAME SOUTHPOINT REALTY, LLC					
OR 6b. INDIVIDUAL'S SURNAME					
		<sup>4</sup> O <sub>x</sub>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
7. CHANGED OR ADDED INFORMATION: Complete for Assignm 7a. ORGANIZATION'S NAME	ent or Party Information Change - provide only o	one name (7a 🗷 🥒 (use exact, full name	: do not omit, modify, or abbreviate any part of th	ne Debtor's name)	
		し			
OR 75, INDIVIDUAL'S SURNAME		O.			
INDIVIOUAL'S FIRST PERSONAL NAME			S		
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)			O <sub>/Sc.</sub>	SUFFIX	
7c. MAILING ADDRESS	CITY		STATE POSTA'L CODE	COUNTRY	
8. COLLATERAL CHANGE: Also check one of these	four boxes: ADD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN collateral	
Indicate collateral:					
ALL THAT PERSONAL PROPERTY DESCRIBED CONNECTION WITH THAT REAL PROPERTY D HERETO.				s y	
				P. 7	
				S_/	

9. N	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME	NDMENT: Provide only one name (9a or 9b) (na	me of Assignor, if this is an Assignment	)
lf	this is an Amendment authorized by a DEBTOR, check here and provide na	ame of authorizing Debtor	•	
	9a. ORGANIZATION'S NAME			
	CAPITAL ONE MULTIFAMILY FINANCE, LLC			
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(SYINITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: SOUTHPOINT REALTY, LLC 602100103

68729876

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FOLLOW INSTRUCTIONS  11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment	nt form		
1417618044 6/25/2014 CC IL Cook			
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amen	dment form		
12a, ORGANIZATION'S NAME CAPITAL ONE MULTIFAMILY FINANCE, LLC			
•			
OR 126. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE USE O	ONLY
13. Name of DEBTOR on related financing streem int (Name of a current Debtor of recone Debtor name (13a or 13b) (use exact, juil ran er do not omit, modify, or abbre			): Provide or
139, ORGANIZATION'S NAME SOUTHPOINT REALTY, LLC		· · · · · · · · · · · · · · · · · · ·	
OB	RST PERSONAL NAME	ADDITIONAL NAME(SYINITIAL(S)	SUFFIX
′ ()			
SOUTHPOINT REALTY, LLC - 1010 WEST 95TH STREET, CHICAG Secured Party Name and Address: CAPITAL ONE MULTIFAMILY FINANCE, LLC - 7600 WISCONSIN AV SECRETARY OF HUD, OFFICE OF RESIDENTIAL CARE FACILITIES	ELUE SUITE 800 , B	BEET A 111 1111 ALIVE ATALL BA AA 11A	
1) SECRETARY OF HUD, OFFICE OF RESIDENTIAL CARE FACILIT	IES P	REET S.W., WASHINGTON, DC 20410	
		7	
		3,0	
		450 OFFICE	
15. This FINANCING STATEMENT AMENDMENT:	17. Descripti	on of real estate:	
covers timber to be cut covers as-extracted collateral is filed as a	1 '		
	fixture filing 1010 V CHICA	on of real estate: VEST 95TH STREET GO, ILLINOIS 60643	
covers timber to be cut covers as-extracted collateral is filed as a 16. Name and address of a RECORD OWNER of real estate described in item 17	fixture filing 1010 V CHICA SEE E	on of real estate: VEST 95TH STREET GO, ILLINOIS 60643 XHIBIT "A" ATTACHED HERET	O AND
covers timber to be cut covers as-extracted collateral is filed as a 16. Name and address of a RECORD OWNER of real estate described in item 17	fixture filing 1010 V CHICA SEE E MADE	on of real estate: VEST 95TH STREET GO, ILLINOIS 60643 XHIBIT "A" ATTACHED HERET A PART HEREOF FOR A	O AND
covers timber to be cut covers as-extracted collateral is filed as a 16. Name and address of a RECORD OWNER of real estate described in item 17	fixture filing 1010 V CHICA SEE E MADE	on of real estate: VEST 95TH STREET GO, ILLINOIS 60643 XHIBIT "A" ATTACHED HERET	O AND

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF FOR A DESCRIPTION OF REAL PROPERTY.
"SOUTHPOINT NURSING AND REHABILITATION CENTER"

18. MISCELLANEOUS: 68729876-IL-31 31153 - CAPITAL ONE MULTIFAM

CAPITAL ONE MULTIFAMILY

File with: Cook, IL.

[ See Exhibit for Real Estate ]

602100103

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**Debtor: SOUTHPOINT REALTY, LLC** 

**Exhibit for Real Estate** 

17. Description of real estate:

Continued

FHA PROJECT NO. 071-22308

Parcel ID:

25-05 423-001-0000,25-05-423-002-0000,25-05 -423-053-0000,25-05-423-004-0000,25-05-42 3-005-0000,25-05-423-006-0000,25-05-423-0 07-0000,25-05-423-008-0000,25-05-423-009-0000

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#### EXHIBIT A

#### LEGAL DESCRIPTION

\*\*\*LOTS 1 TO 10 INCLUSIVE IN BLOCK 16 (EXCEPTING FROM LOT 10 THAT PART LYING SOUTH OF A LINE 54.00 FEET NORTH OF AND PARALLEL TO THE SOUTH LINE OF SECTION 5, TAKEN FOR 95<sup>TH</sup> STREET), IN HENRY WELP'S HALSTED STREET ADDITION TO WASHINGTON HEIGHTS, BEING A SUBDIVISION OF LOT 4 OF THE SUBDIVISION OF THAT PART OF THE SOUTHEAST QUARTER OF SECTION 5, TOWNSHIP 37 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING EAST OF THE CHICAGO ROCK ISLAND AND PACIFIC RAILROAD COMPANY TOGETHER WITH LOT 1 OF SUBDIVISION OF THAT PART OF NORTHEAST QUARTER OF SECTION 8, TOWNSHIP 37 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING EAST OF THE CHICAGO ROCK ISLAND AND PACIFIC RAILROAD COMPANY, IN COOK COUNTY, ILLINOIS.\*\*\*

NOTE: 25-05-423-001, vol. 450

25-05-423-002, vol. 450 25-05-423-003, vol. 450 25-05-423-004, vol. 450 25-05-423-005, vol. 450 25-05-423-006, vol. 450

25-05-423-007, vol. 450 25-05-423-008, vol. 450 25-05-423-009, vol. 450

NOTE:

COMMONLY KNOWN AS:

-1010 West 95<sup>TH</sup> STREET, CHICAGO, ILLINOIS

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#### EXHIBIT B

All of Debtor's present and future right, title and interest in and to all of the following, whether now owned or held or later acquired (all capitalized terms have the meaning set forth in that certain Healthcare Mortgage, Assignment of Leases, Rents and Revenue and Security Agreement—made by SOUTHPOINT REALTY, LLC, an Illinois limited liability company ("Borrower") to CAPITAL ONE MULTIFAMILY FINANCE, LLC, a Delaware limited liability company ("Lender") dated as of June 1, 2014):

- all the estate in realty described in Exhibit A (the "Land");
- (2) All the portion of the Project operated on the Land as a Nursing Home, Intermediate Care Facility, Board and Care Home, Assisted Living Facility and/or any other healthcare facility authorized to receive insured mortgage financing pursuant to Section 2°2 of the National Housing Act, as amended, including any commercial space included in the facility (the "Healthcare Facility");
- all buildings, structures and alterations now constructed or at any time in the future constructed or placed upon the Land, including any future replacements and additions (the "Improvements");
- all property or goods that become so related or attached to the Land or the (4) Improvements that an interest (rise) in them under real property law, whether acquired now or in the future, excluding all resident owned goods and property, and including but not limited to: major raovable equipment, machinery, equipment (including medical equipment and systems), engines, boilers, incinerators, installed building materials; systems and equipment for the purpose of supplying or distributing heating, cooling, electricity, gas, water, air, or light; antennas, cable, wiring and conduits used in connection with radio, television, computers and computer software, medical systems, security, fire prevention, or fire detection or otherwise used to carry electronic signals; telephone systems and equipment; elevators and related machinery and equipment; fire detection prevention and extinguishing systems and apparatus; security and access control systems and apparatus; plumbing systems; water heaters, ranges, stoves, microwive ovens, refrigerators, dishwashers, garbage disposals, washers, dryers and other up liances; light fixtures, awnings, storm windows and storm doors; pictures, screens, blinds, shades, curtains and curtain rods; mirrors; cabinets, paneling, rugs and floor and wall coverings; fences, trees and plants; swimming pools; playground and exercise equipment and classroom furnishings and equipment (the "Fixtures");
- (5) all equipment, inventory, and general intangibles associated with the Healthcare Facility and/or the Project. It includes furniture, furnishings, beds, machinery, building materials, appliances, goods, supplies, tools, books, records (whether in written or electronic form), computer equipment (hardware and software) and other tangible or electronically stored personal property (other than Fixtures) that are owned, leased or used now or in the future in connection with the ownership, management or operation of the Healthcare Facility and/or any other portion of the

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Project, or are located on the Land or in the Improvements, and any operating agreements relating to the Project, and any surveys, plans and specifications and contracts for architectural, engineering and construction services relating to the Project, and all other intangible property and rights relating to the operation of, or used in connection with, the Project, including all certifications, approvals and governmental permits relating to any activities on the Land. Personalty includes all tangible and intangible personal property used in connection with the Healthcare Facility (such as major movable equipment and systems), accounts, licenses, bed authorities, certificates of need required to operate the Healthcare Facility and to receive benefits and reimbursements under provider agreements with Medicaid, Medicare, State and local programs, payments from healthcare insurers and any oner assistance providers; all certifications, permits and approvals, instruments, Rears lease and contract rights, equipment leases relating to the use, operation, maintancice, repair and improvement of the Healthcare Facility. Generally, intangibles chall also include all cash and cash escrow funds, such as but not limited to: reserve for replacement accounts, debt service reserve accounts, bank accounts, Residual Receir's accounts, and investments (the "Personalty");

- all current and future rights, including air rights, development rights, zoning rights and other similar rights or interests, easements, tenements, rights-of-way, strips and gores of land, streets, airers, roads, sewer rights, waters, watercourses, and appurtenances related to or benefiting the Land or the Improvements, or both, and all rights-of-way, streets, alleys and roads which may have been or may in the future be vacated;
- all insurance policies covering any of the Morgaged Property, and all proceeds paid or to be paid by any insurer of the Land, inc Improvements, the Fixtures, the Personalty or any other part of the Mortgaged Property, whether or not Borrower obtained the insurance pursuant to Lender's requirement:
- (8) all awards, payments and other compensation made or to be made by any Governmental Authority with respect to the Land, the Improvements, the Fixtures, the Personalty or any other part of the Mortgaged Property, including any awards or settlements resulting from condemnation proceedings or the total or partial taking of the Land, the Improvements, the Fixtures, the Personalty or any other part of the Mortgaged Property under the power of eminent domain or otherwise and including any conveyance in lieu thereof;
- (9) all contracts, options and other agreements for the sale of the Land, the Improvements, the Fixtures, the Personalty or any other part of the Mortgaged Property entered into by Borrower now or in the future, including cash or securities deposited to secure performance by parties of their obligations;
- (10) all proceeds (cash or non-cash), liquidated claims or other consideration from the conversion, voluntary or involuntary, of any of the Mortgaged Property and the right to collect such proceeds, liquidated claims or other consideration;

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- (11) all revenue generated by any portion of the Mortgaged Property and any Leases;
- all earnings, royalties, instruments, accounts (including any deposit accounts),
  Accounts Receivable, supporting obligations, issues and profits from the Land, the
  Improvements, the Healthcare Facility, or any other part of the Mortgaged Property,
  and all undisbursed-proceeds of the Loan;
- (13) all Imposition Deposits;
- all refunds or rebates of Impositions by any Governmental Authority or insurance company (other than refunds applicable to periods before the real property tax year in which this Security Instrument is dated);
- (15) · all forleited security deposits under any Lease;
- all names under or by which any of the above Mortgaged Property may be operated or known, and all trademarks, trade names, and goodwill relating to any of the Mortgaged Property;
- (17) all deposits and/or escrews held by or on behalf of Lender under Ancillary Agreements;
- (18) all awards, payments, settlements of other compensation resulting from litigation involving the Project;
- any and all licenses, bed authority, and/or certificates of need; required to operate the Healthcare Facility and receive the benefits and reimbursements under a provider agreement with Medicaid, Medicarc, any State or local programs, healthcare insurers or other assistance providers rened upon by HUD to insure this Security Instrument, to the extent allowed by law, and regardless of whether such rights and contracts are held by Borrower or an operator; and
- all receipts, revenues, income and other moneys received by cron behalf of the Healthcare Facility, including all Accounts Receivable, all contributions, donations, gifts, grants, bequests, all revenues derived from the operation of the Healthcare Facility and all rights to receive the same, whether in the form of Accounts Receivable, contract rights, chattel paper, instruments or other rights whether now owned or held or later acquired by or in connection with the operation of the Healthcare Facility.