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	1909417871 Doc# 1909417071 Fee \$42.00				
UCC FINANCING STATEMENT AMENDME FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294		1	E:\$9.00 RPRF FEE: \$1.00		
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com			n. MOODY		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)			UNTY RECORDER OF DEEDS		
1618 93940 CSC	\neg	DATE: 0	4/04/2019 02:32 PM PG:	1 OF 3	
801 Adlai Stevenson Drive Springfield, IL 6270°	iled In: Illinois	\ ·= ·			
	(Cook)	THE ABOVE SPA	CE IS FOR FILING OFFICE USE	ONLY	
1a, INITIAL FINANCING STATEMENT F'. E N JMBER 1602822068 01/28/2016	:	1b. This FINANCING STATEM (or recorded) in the REAL	MENT AMENDMENT is to be filed [fo	r record)	
TERMINATION: Effectiveness of the Financian Statement identified a	shove is terminated y		fendum (Form UCC3Ad) and provide Deb		
Statement Statement	DOVE IS TERMINIATED Y	will respect to the security interes	si(a) or decured raily admoniting an	- Tellimatori	
ASSIGNMENT (full or partial): Provide name of A sign as in item 7a of For partial assignment, complete items 7 and 9 and also include affects.			f Assignor in item 9		
CONTINUATION: Effectiveness of the Financing Statemer, ident lied continued for the additional period provided by applicable law	d above with respect	to the security interest(s) of Sec	ured Party authorizing this Continuat	ion Statement is	
5. PARTY INFORMATION CHANGE:	07				
Check offe of these two boxes.	these three both ANGI name and/or a	address: CompleteADD nam		Give record name	
This Change affects Debtor or Secured Party of record ite. 6. CURRENT RECORD INFORMATION: Complete for Party Information Cl	m 6a or 6b; Figurem 1		and item 7c to be deleted in	item ba or ob	
6a. ORGANIZATION'S NAME	C				
OR 65. INDIVIDUAL'S SURNAME	FIRST PERSON	NAL/(AM).	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
Ware	Marilyn				
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information (Tal. ORGANIZATION'S NAME)	rmation Change - provide o	only <u>one</u> name (7a or 7h ^x , use exact, full na	me; do not omit, modify, or abbreviate any part	of the Debtor's name)	
OR 75. INDIVIDUAL'S SURNAME		(0)			
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			Visc.	SUFFIX	
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY	
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral R	ESTATE covered collateral	ASSIGN collateral	
	5A14800				
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS	AMENDMENT: P	rovide only one name (9a or 9b) (n	ame of Assignor, if this is an Assignm	ent)	
If this is an Amendment authorized by a DEBTOR, check here and provide	de name of authorizir				
9a. ORGANIZATION'S NAME MICROF					
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	



1618 93940

10. OPTIONAL FILER REFERENCE DATA: Debtor: Marilyn Ware

1909417071 Page: 2 of 3

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	CC FINANCING STATEMENT LLOW INSTRUCTIONS	AMENDMEN	NI ADDEN	ADOIA!			
11. 1	INITIAL FINANCING STATEMENT FILE NUMB 602822068 01/28/2016	BER: Same as item 1a on	Amendment form				
_	NAME OF PARTY AUTHORIZING THIS AMEN	DMENT: Same as item 9	on Amendment form	1			
12a. ORGANIZATION'S NAME Microf							
05							
OR	12b. INDIVIDUAL'S SURNAME						
	FIRST PERSONAL NAME						
	ADDITIONAL NAME(S)/INITIA' (S)		SUF	FFIX	THE ABOVE S	SPACE IS FOR FILING OFFICE U	JSE ONLY
13.	Name of DEBTOR on related financing state.				ng purposes only in so	me filing offices - see Instruction item	
	one Debtor name (13a or 13b) (use exact, full name	do not omit, modify, or abb	previate any part of the	ne Debtor's n	name); see Instructions	s if name does not fit	
	TOB. ONGANIZATION O NAME.	$O_{\mathcal{F}}$					
OR	13b. INDIVIDUAL'S SURNAME Ware	C	FIRST PERSONA Marilyn	AL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
14.	ADDITIONAL SPACE FOR ITEM 8 (Collateral)),				•
15.	This FINANCING STATEMENT AMENDMENT:		17		7.36, real estate 36-104-050-0	000 See attached exhib	nit.
28	covers timber to be cut covers as-extracte Name and address of a RECORD OWNER of real estriction of the control		as a fixture filing	111.20	30 104 000 0	ood odd attached caring	
18. R	MISCELLANEOUS: TO-35300						

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Z LOT THE IN FIRST ADDITION TO PACESETTER KNOLLCREST HARRY OUINN MEMORYAL SUBDIVISION OF PART OF THE EAST 112 OF EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, NORTHWEST 114 OF SECTION 36, TOWNSHIP 36 NORTH, ONITI

28-98-104-050 OR PARCEL ID NO :: TAX MAP

ZBUS GHEENWOOD

KNUM AU