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NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294 E-MAIL CONTACT AT FILER (optional) SPRFilling@cscglobal.com SEND ACKNOWLEDGMENT TO: (Name and Address) [1669-31511 CSC 801 Adial Stevenson Drive Springfield, IL 6270*. Filed In: Illinois [Cook] THE INITIAL FINANCING STATEMENT FLENUMBER 720745096 07/26/2017 [TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the statement ASSIGNMENT (full or partial): Provide name of A signee in term 7 or 7b, and address of Assignee in item For partial assignment, complete items 7 and 9 and also relicate affected collateral in item 8 CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security in continued for the additional period provided by applicable law PARTY INFORMATION CHANGE: Check and of these two boxes: This Change affects Debtor or Secured Party of record CHARGE Iname and/or address. Complete item 8 or 7b and item 7c or 7b and	ABOVE SPACE IS FO CING STATEMENT AME In the REAL ESTATE I Amendment Addendum (For security interest(s) of Sec re and name of Assignor rest(s) of Secured Party ADD name: Comple 7a or 7b, and item 7	FEE: \$1.00 R OF DEEDS 101 PM PG: 1 UF R FILING OFFICE USE O NDMENT is to be filed [for r RECORDS TUCC3Ad) and provide Debtor ured Perty authorizing this T in item 9 authorizing this Continuation	only record] 's name in item 13 Termination In Statement is
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	rat RESTATE c	overed collateral AS	SSIGN collateral
y & Night Evaporator Coil M# ENA4X24L17A S# X141243653			
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one natities is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME Microf		ignor, if this is an Assignmen	t)
9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME	ne (9a or 9b) (name of Ass	·	
OPTIONAL FILER REFERENCE DATA: Debtor: Jonathen Johnson		IAL NAME(S)/INITIAL(S)	SUFFIX

1919616129 Page: 2 of 2

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UCC FINANCING STATEMENT AMENDMEN			
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on 1720745096 07/26/2017			
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9	on Amendment form	•	
12a, ORGANIZATION'S NAME Microf			
OR			
12b, INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
· O.			
ADDITIONAL NAME(S)/INITIA' (S)	SUFFIX		
13. Name of DEBTOR on related financing staturent (Name of a current Del	hter of regard required for indexin	THE ABOVE SPACE IS FOR FILING OFFICE L	
one Debtor name (13a or 13b) (use exact, full name, do not omit, modify, or abb			13). Provide dilij
13a. ORGANIZATION'S NAME			
OR 13b, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Johnson	Jonathen	ADDITIONAL VANICUO/ANTACCO)	SOLLIX
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):		<u>L</u>	
. 15. This FINANCING STATEMENT AMENDMENT:		7-35-316-014-000	
	na a fíotura filipa I	-35-316-014-000 lock 2 William H Knaf's Resub of 29-4	46 in Hvde
16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):	Park, in	Township 38 North, Range 14 East, S	Section 35,
8641 S Drexel Ave Chicago, IL 60619		E 1/4, of 1/4 Southwest, of 1/4 Southw	
	third wiel	ridian Principal recorded in County of	COOK, IL
18. MISCELLANEOUS: RTO-60458			