## UNOFFICIAL COPY\_

			92844ññ4₹æ	
		Doc# 192844		
UCC FINANCING STATEMENT AMEND FOLLOW INSTRUCTIONS	MENT	RHSP FEE:\$9.00	RPRF FEE: \$1.00	
A, NAME & PHONE OF CONTACT AT FILER (optional)		EDWARD M. HOOD		
SUE SKINNER 312-360-3309  B. E-MAIL CONTACT AT FILER (optional)		DATE: 19411420	5 05 44 5	
skinner@somercor.com		J 10/11/20	19 02:40 PM PG: 1 OF	3
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		·	·• · · · <u> · · · · · · · · · · · · · </u>	_
SOMERCOR 504, INC. 601 S. LASALLE SUITE 510 CHICAGO, L. 50605		•		
L 952 (12 334			ACE IS FOR FILING OFFICE US	
1009916095 FILED 4/0.7/10 COOK COU	UNTY "	(or recorded) in the REA	LESTATE RECORDS ddendum (Form UCC3Ad) <u>and</u> provide De	
TERMINATION: Effectiveness of the Figure ng Statement ider Statement	ntifled above is terminated wit			
ASSIGNMENT (full or partial): Provide name of Assi ,no., in its     For partial assignment, complete items 7 and 9 <u>and</u> also indicate		Assignee in item 7c <u>and</u> nama	of Assignor in Item 9	
CONTINUATION: Effectiveness of the Financing Statem of It continued for the additional period provided by applicable law.		o the security interest(s) of Se	cured Party authorizing this Continu	ation Statement is
This Change affects Obbitor of Secured Party of record	Check wor of these three box CHANCE name and/or ad item 6a or 6b; and using 7a	dress: Complete ADD no or 7b and item 7c 7a or 7	ame: Complete itom DELETE nem b, and item 7c to be deleted	ie: Give record name in item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Inform     Sa. ORGANIZATION'S NAME	ation Change - p. wide only or	<u>ів</u> пате (6a or 6b)		
OR 6b. INDIVIDUAL'S SURNAMÉ	FIRST PERSONA	LNAM :	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Ta. ORGANIZATION'S NAME	Party information Change - provide on	ly <u>one</u> name (7a or 7b <sup>1</sup> ( exact, full	name; do not omit, modily, or abbreviate any p	art of the Debtor's name)
OR 76. INDIVIOUAL'S SURNAME		<del>(0)</del>	5/	
INDIVIDUAL'S FIRST PERSONAL NAME		•	TS	
INDIVIOUAL'S ADDITIONAL NAME(S)/INITIAL(S)			0,5	SUFFIX
7c. MAILING ADDRESS	CITY	<u> </u>	STATE POSTAL CUPE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETÉ collatoral	RESTATE covered collateral	ASSIGN collateral
Indicate collateral:				
NAME OF SECURED PARTY OF RECORD AUTHORIZIN     If this is an Amendment authorized by a DEBTOR, check here  as     98. ORGANIZATION'S NAME	nd provide name of authorizing		(name of Assignor, if this is an Assign	nment)
U.S. SMALL BUSINESS ADMINIST		I MANAT	TAODITIONAL MANEZONANTIALZO	)  SUFFIX
St. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDÍTIONAL NAME(S)/INITIAL(S	/ Jaurrix
10. OPTIONAL FILER REFERENCE DATA: ML 1768 SERENDIPITY CHILDCARE				
FILING OFFICE COPY UCC FINANCING STATEMENT A	MENDMENT (Form UC	International As C3) (Rev. 04/20/11)	sociation of Commercial Adm	inistrators (IACA)

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UCC FINANCING STATEMENT AMENDMEN FOLLOWINSTRUCTIONS	T ADDENDUM		
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as Item 1a on A 1009916095 FILED 4/09/10 COOK COUNTY	Amendment form 7		•
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as Item 9			
12a. ORGANIZATION'S NAME U.S. SMALL BUSINESS ADMINISTRATI	ON		
OR 12b. INDIVIDUAL'S SUFNAME			
N <sub>2</sub>			
FIRST PERSONAL 'AMP			
ADDITIONAL NAME(SMI) (AL,S)	SUFFIX	THE ABOVE SPACE IS FOR FILING	G OFFICE USE ONLY
13. Name of DEBTOR on related financing hat ment (Name of a current Del	btor of record required for indexing pa	rposes only in some filing offices - see Ins	
one Debtor name (13a or 13b) (uso exact, full nr mo, do not omit, modify, or abb	reviate any part of the Debtor's name	); see Instructions if name does not fit	
13a. ORGANIZATION'S NAME			
OR 13b. INDIVIDUAL'S SURNAME ROYSTER	FIRST PERSONAL NAME  AARON	ADDITIONAL NAME(S)/I	INITIAL(S) SUFFIX
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):			<u> </u>
15. This FINANCING STATEMENT AMENDMENT:	17. Description o	Creal estate:	
covers timber to be cut  covers as-extracted collateral  Is filed	as a fixture filing SEE ATTA	ACHED EXHIBIT "A"	
16. Name and address of a RECORD OWNER of real estate described in item 17 (If Debtor does not have a record inforest):	COMMO	N ADDRESS: 1300 W. 99T	н st. chicago,
ADDITIONAL DEBTORS:	IL 60643		
SERENDIPITY CHILDCARE, INC. SARAH D ROYSTER	PIN: 25-08	3-115-035-0000	
18. MISCELLANEOUS:			

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EXHIBIT "A"

Legal Description

LOT 143 M MALEY'S SECOND ADDITION TO LONGWOOD MANOR BEING A SUBDIVISION OF THE EAST 247.5 FEEL OF THE SOUTH 125 FEET OF BLOCK 2 IN HILLARD AND DOBBINS FIRST ADDITION TO WASHINGTO', PEIGHTS IN THE EAST 1/2 OF THE NORTHEAST, 1/4 OF SECTION 7 AND THE NORTHWEST 1/4 OF SECTION 8, TOWNSHIP 37 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, TOGETHER WITH PART OF ABANDONED RAILROAD RIGHT OF WAY IN COOK COUNTY, ILLINOIS

The Real Property or its address is commonly known as 1300 W. 99th Street, Chicago, il. 60643. The Real Property tax Identification number is 25-08-115-035-0000.