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	CC FINANCING STATEMENT AMENDME	ENT		*1931613189×	
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	1726 44061 CSC			11.412.4204.2	
	801 Adlai Stevenson Drive			11/12/2019 03:04 PM PG:	1 OF 2
Ι.	Springfield, IL 62703	Filed In: Illinois			
	_	(Cook)	THE AROVE SPACE	CE IS FOR FILING OFFICE USE	ONLY
	INITIAL FINANCING STATEMENT FILE NUMBER 00944085 01/09/2015		1b. This FINANCING STATEM (or recorded) in the REAL	ENT AMENDMENT is to be filed [for	record]
2. [TERMINATION: Effectiveness of the Financing Statement identified Statement	above is terminated			
3, [ASSIGNMENT (full or partial): Provide name of Assignee in item 7a For partial assignment, complete items 7 and 9 and lise in cate affecting			Assignor in item 9	-
4.	CONTINUATION: Effectiveness of the Financing Statemer, iden, fi continued for the additional period provided by applicable law	ed above with respec	to the security interest(s) of Secu	red Party authorizing this Continuati	on Statement is
5.	PARTY INFORMATION CHANGE:				
		chongofinese three b CHANGI name and/or- tem 6a ir 6b; and item			Give record name
	his Change affects Debtor or Secured Party of record SURRENT RECORD INFORMATION: Complete for Party Information			and item 7c to be deleted in	tem 6a dr 6b
	6a. ORGANIZATION'S NAME	Charge - pr vide only	VIII name (od or co)		
OR			<u></u>		
VIC	6b. INDIVIDUAL'S SURNAME EDMONDS	FIRST PERSON	IAC MAMIT	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. (CHANGED OR ADDED INFORMATION: Complete for Assignment or Party In	formation Change - provide	only one name (7a or 7b) / exact. full nar	t ne; do not omit, modify, or abbreviate any part o	f the Debtor's name)
7. (CHANGED OR ADDED INFORMATION: Complete for Assignment or Party In Ta. ORGANIZATION'S NAME	I formation Change - provide	only one name (7a or 7b) / exact. full nar	ne; do not omit, modify, or abbreviate any part o	f the Debtor's name)
OB		formation Change - provide	only <u>one</u> name (7a or 7b) ///// exact, full nar	ne, do not omit, modify, or abbreviate any part o	f the Debtor's name)
OB	7a. ORGANIZATION'S NAME	I formation Change - provide	only <u>one</u> name (7a or 7b) / 110A exact, full nar	ne, do not omit, modify, or abbreviate any part o	the Debtor's name)
OB	7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME	formation Change - provide	only <u>one</u> name (7a or 7b) //// exact, full nar	ne, do not omit, modify, or abbreviate any part of	f the Debtor's name)
OR	7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME	formation Change - provide	only <u>one</u> name (7a or 7b) / ma exact, full name	state Postal Cost	
OR	7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS		C/A	STATE POSTAL LODG	SUFFIX
OR	7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes:	CITY	C/A	STATE POSTAL LODG	SUFFIX COUNTRY USA
OR	7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes:	CITY	C/A	STATE POSTAL LODG	SUFFIX COUNTRY USA
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10. OPTIONAL FILER REFERENCE DATA: Debtor: EDMONDS, FLORA B-: CCFS001203369

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17. Description of real e Legal Descript	state:	
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