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### UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) CUSTOMER SERVICE, (877) 774-4417	·
B. E-MAIL CONTACT AT FILER (optional)	
CSR@FCCFINANCE.COM	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
FCC Finance, LLC P.O. Box 795489 Dallas, TX 75379-5489	

Doc# 2000633032 Fee \$93.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00

EDHARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 01/06/2020 03:22 PM PG: 1 OF 4

1621829145	$\cup_{\lambda}$

	THE AF	BOVE SPACE IS FOR FILING OFFICE U	SE ONLY
1a. INITIAL FINANCING STATEMENT FILE YUN BER	1b. 771This FINANCI	NG STATEMENT AMENDMENT is to be filed	for record)
1621829145		in the REAL ESTATE RECORDS	
1021023140	Filer: attach Am	endment Addendum (Form UCC3Ad) and provide D	ebtor's name in item 13
TERMINATION: Effectiveness of the Financin's Statement identified a Statement	bove is terminated with respect to the second	urity interest(s) of Secured Party authorizing t	his Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a of For partial assignment, complete items 7 and 9 and at o indicate affects.	<del></del>	<u>and</u> name of Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statement i entire continued for the additional period provided by applicable law.	I above with respect to the security interes	st(s) of Secured Party authorizing this Continu	ation Statement is
5. PARTY INFORMATION CHANGE:			<u> </u>
	k _ne_of /nese three boxes to:		
	CHANCE name and/or address: Complete em 6a o 6b; and from 7a or 7b and item 7c		ime: Give record nan ed in item 6a or 6b
		Tradition, and termine to be dejete	d III Rein Qa OI OD
<ol> <li>CURRENT RECORD INFORMATION: Complete for Party Information Ch fea. ORGANIZATION'S NAME</li> </ol>	range - provi e only one name (ea or eb)		
DB HIL 2014 TRUST			
OR 66, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information	in Change - provide only one name (7.50, 10) (use ex	tull name; do not omit, modify, or abbreviate any part of	fthe Debtor's name)
7a, ORGANIZATION'S NAME			
WF HIL 2017-2 GRANTOR TRUST		-/-	
OR 75, INDIVIDUAL'S SURNAME		<del></del>	
15.116/116/116		4	
INDIVIDUAL'S FIRST PERSONAL NAME		7.0	

INDIVIDUAL'S FIRST PERSONAL NAME		· · · · ·	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		O/Sc.	SUFFIX
7c. MAILING ADDRESS	CITY	STATE POSTAL CUPE	COUNTRY
P.O. BOX 795489	DALLAS	TX 75379	,
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral DELETE collater	al RESTATE covered collateral	ASSIGN collateral
Indicate collateral:	t		
			5 7
			9 4
			SM
NAME OF SECURED PARTY OF RECORD AUTHORIZING T     If this is an Amendment authorized by a DEBTOR, check here and     and     In an amendment authorized by a DEBTOR, check here	THIS AMENDMENT: Provide only one name provide name of authorizing Debtor	(9a or 9b) (name of Assignor, if this is an Assignmen	W 4
DB HIL 2014 TRUST		_	SC 4
OR 96. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: 62586 - COOK COUNTY			INT 9

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FOLLOW INSTRUCTIONS	NI ADDENDO	IAI		
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on A	Amendment form	7		
1621829145				
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9	on Amendment form			
12a. ORGANIZATION'S NAME				
DB HIL 2014 TRUST				
	<del></del> -			
		ŀ		
00				
OR 12b. INDIVIDUAL'S SURNAME				
FIRST PERSONAL N' (E				
ADDITIONAL MANEGONIA AUG	Louisely	_		
ADDITIONAL NAME(S)/INIT AL(\$)	SUFFIX			
10		THE ABOVE	SPACE IS FOR FILING OFFICE U	ISE ONLY
13. Name of DEBTOR on related financing statement (Name of a current Debtors 12) (12) (12) (13) (13) (14) (15) (15) (15) (15) (15) (15) (15) (15				Provide only
one Debtor name (13a or 13b) (use exact, full name, up not omit, modify, or abbr	eviate any part of the Debtor's	name), see instructions t	Triame does not no	
0.0				
OR 13b, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Young	Alphonso			
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):	•			
	Alphonso			
15. This FINANCING STATEMENT AMENDMENT:	17, Descri	ption of real estate:	<del></del>	
covers timber to be cut covers as-extracted collateral is filed		•	AL DESCRIPTION	
16. Name and address of a RECORD OWNER of real estate described in item 17		THORED ELOP	RE DEGGRAM MON	
(if Debtor does not have a record interest):		rty Address - Flossmoor Rd Fl	ossmoor IL 60422	
	Baraa	l #31 <b>-</b> 01-422-017	0000	
18. MISCELLANEOUS:				

2000633032 Page: 3 of 4

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#### UCC FINANCING STATEMENT AMENDMENT ADDITIONAL PARTY FOLLOW INSTRUCTIONS

19, INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1	a on Amendment form			
1621829145  20. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as it	tom O an Amandment form			
20a. ORGANIZATION'S NAME	tem 9 on Amendment tom			
DB HIL 2014 TRUST				
DB 1116 2014 111001				
OR				
20b. INDIVIDUAL'S SURNAME		Print	Reset	
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
21. ADDITIONAL DEBTOR'S NAME: Provid only one Debtor name (2	1a or 2th) /use exact full name: do not omit		IS FOR FILING OFFICE	USE ONLY
21a. ORGANIZATION'S NAME	ta or 21b) (use exact, full frame, 60 not offic,	, modify, or abbreviate any	part of the Deptor's name)	
OR 21b. INDIVIDUAL'S SURNAME Young	FIRST PERSONAL NAME  Earnestine	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
21c. MAILING ADDRESS	спу	STATE	POSTAL CODE	COUNTRY
2411 FLOSSMOOR RD	Flossmoor	IL	60422-1517	COUNTRY
22. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (2)	<u> </u>	mortify or abbreviate any	part of the Debtor's name)	
22a. ORGANIZATION'S NAME			part of the Bobton o mainter,	
OR				
22b. INDIVIDUAL'S SURNAME	FIRST PERSON L NAME	ADDITIO	NAL NÁME(S)/INITIAL(S)	SUFFIX
22c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
23. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (2)	3a or 23b) (use exact, full name; do not omit,	mcdiv, or abbreviate any	part of the Debtor's name)	
23a, ORGANIZATION'S NAME				
OR 23b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	TADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
		7		
23c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
		9		
	SIGNOR SECURED PARTY'S NA	ME: Provide only one na	m (24 / c / 24b)	
24a. ORGANIZATION'S NAME				
OR 24b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)IT AL'S)	SUFFIX
24c. MAILING ADDRESS	СПҮ	STATE	POSTAL CODE	COUNTRY
25. ADDITIONAL SECURED PARTY'S NAME or AS	I SIGNOR SECURED PARTY'S NA	.ME: Provide only one na	me (25a or 25b)	1
25a. ORGANIZATION'S NAME			/ <del>/</del>	
OR 25b. INDIVIDUAL'S SURNAME	EIDET DEDCOMAL MANE	LADDITIO	MAL MARKETON MANUTTAL TO	Teneriy
200. INDIVIDUAL & SURIARME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
25c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
26 MISCELLANEOUS:	<u> </u>		1	

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#### **LEGAL DESCRIPTION**

THE FOLLOWING DESCRIBED REAL ESTATE, SITUATED IN COUNTY, ILLINOIS, TO-WIT:THE SOUTH 75 FEET (MEASURED FROM THE NORTH LINE OF ILLINOIS STREET) OF LOT 5, IN BLOCK 2, IN SUBDIVISION OF THE SOUTH 634.24 FEET OF BLOCK 10, AND (EXCEPT TRIANGLE IN THE SOUTHWEST CORNER HAVING A FRONTAGE ON ILLINOIS STREET OF 92.09 (FEET) IN BLOCK 9 SUBDIVISION OF \$1.76 ACRES IN THE SOUTHEAST QUARTER OF SECTION 1, TOWNSHIP 35 NORTH, ANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, EXCEPT THAT PART OF THE SOUTH 75 FEET (AS MEASURED FROM THE NORTH LINE OF ILLINOIS STREET) OF LOT 5, IN BLOCK 2, IN THE SUBDIVISION OF THE SOUTH 634.24 FEET OF BLOCK10, AND (EXCEPT TRIANGLE IN THE SOUTHWEST CORNER HAVING A FRONTAGE ON ILLINOIS STREET OF 92.09 FEET) OF BLOCK 9. IN THE SUBDIVISION OF 91.76 ACRES IN THE SOUTHEAST QUARTER OF SECTION 1, TOWNSHIP 35 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING SOUTHEASTERLY OF A LINE EXTENDED FROM THE EAST LINE OF LOT 5 AFORESAID, 25 FEET NORTH OF THE SOUTHEAST CORNER THEREOF, TO THE SOUTH LINE OF LOT 5 AFORESAID, 25 FEET WEST OF SAID SOUTHEAST CORNER, IN COOK COUNTY, ILLINOIS COMMONLY KNOWN AS: 2411 FLOSSMOOR ROAD. FLOSSMOOR, ILLINOIS 60422PERMANENT INDEX NUMBER: 31-01-422-017-0000