

# UNOFFICIAL COPY



Doc# 2002806141 Fee \$93.00

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

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 01/28/2020 04:20 PM PG: 1 OF 3

## 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

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER  
1922012007

1b.  This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS  
Filer, attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2.  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3.  ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4.  CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5.  PARTY INFORMATION CHANGE:

Check one of these two boxes:  Debtor or  Secured Party of record

AND Check one of these three boxes to:  
 CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c  
 ADD name: Complete item 7a or 7b, and item 7c  
 DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME DB HIL 2014 TRUST				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME WF HIL 2017-2 GRANTOR TRUST				
OR	7b. INDIVIDUAL'S SURNAME			
	INDIVIDUAL'S FIRST PERSONAL NAME			
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX

7c. MAILING ADDRESS P.O. BOX 795489	CITY DALLAS	STATE TX	POSTAL CODE 75379	COUNTRY
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8.  COLLATERAL CHANGE: Also check one of these four boxes:  ADD collateral  DELETE collateral  RESTATE covered collateral  ASSIGN collateral  
Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a DEBTOR, check here  and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME DB HIL 2014 TRUST				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. OPTIONAL FILER REFERENCE DATA:  
67076 - COOK County, IL

S Y  
P 3  
C N  
E Y  
SC Y  
E N  
INTA.V  
DI-16-20

**UNOFFICIAL COPY****UCC FINANCING STATEMENT AMENDMENT ADDENDUM**

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form

1922012007

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

OR	12a. ORGANIZATION'S NAME DB HIL 2014 TRUST	
	12b. INDIVIDUAL'S SURNAME	
	FIRST PERSONAL NAME	
	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

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13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

OR	13a. ORGANIZATION'S NAME			
	13b. INDIVIDUAL'S SURNAME Smith	FIRST PERSONAL NAME Felicia	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

13. This FINANCING STATEMENT AMENDMENT:

 covers timber to be cut   
 covers as-extracted collateral   
 is filed as a fixture filing
16. Name and address of a RECORD OWNER of real estate described in item 17  
(if Debtor does not have a record interest):

17. Description of real estate:

Property Address -  
15220 State St  
South Holland IL 60473

Parcel # 29-09-418-050-0000

18. MISCELLANEOUS:

**UNOFFICIAL COPY**

FDI #:

1260007-1

REF #:

67076

**LEGAL DESCRIPTION :**

The following described Real Estate situated in the County of Cook in the State of IL, to wit:

The West 147.50 feet of the East 175 feet of the South 70 feet of the North 1605 feet of the Southeast 1/4 of Section 9, Township 36 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois, except that part of the West 147.5 feet of the East 175 feet of the South 70 feet of the North 1605 feet of the Southeast 1/4 of Section 9, Township 36 North, Range 14, East of the Third Principal Meridian, lying East of a line drawn from a point on the North line of said South 70 feet, distant 11.23 feet West of the East line of said West 147.5 feet to a point on the South line of said North 1605.00 feet, distant 13.26 feet West of the East line of said West 147.5 feet, all in Cook County, Illinois.

Parcel No.: 29-09-418.050.0000

Property Address: 15220 South State, South Holland, Illinois 60473

THE INFORMATION CONTAINED WITHIN THIS REPORT IS NOT TO BE CONSIDERED AN EXAMINATION, CERTIFICATION OR REPRESENTATION OF FACT OR TITLE AND DOES NOT CREATE AND SHALL NOT BE THE BASIS OF ANY CLAIM FOR NEGLIGENCE, NEGLIGENT MISREPRESENTATION OR OTHER TORT CLAIM OR ACTION. MOREOVER, THIS REPORT DOES NOT EXPLAIN THE LEGAL STATUS OF TITLE TO REAL ESTATE, THE LEGAL EFFECT OF ANYTHING FOUND WITHIN THE CHAIN OF TITLE OR THE LEGAL EFFECTS OF OTHER MATTERS FOUND OF RECORD THAT COULD AFFECT THE MARKETABILITY OF TITLE.

THE SOLE LIABILITY OF FINANCIAL DIMENSIONS, INC. TO ANY PARTY FOR LOSS(ES) SUSTAINED BY RELIANCE UPON THE INFORMATION PROVIDED WITHIN THIS REPORT SHALL BE LIMITED TO THOSE AMOUNTS PAID FOR SAID REPORT.

**Thank you for selecting Financial Dimensions, Inc.!**

Financial Dimensions, Inc.  
7025 Clairton Rd  
West Mifflin, PA 15122  
1-800-858-9808