## **UNOFFICIAL COPY**

UCC FINANCING STATEMENT AMENDMENT FOLLOWINSTRUCTIONS	*2012908150* Doc# 2012908150 Fee \$88.00
A. NAME & PHONE OF CONTACT AT FILER (optional) UCC MANAGER (312) 224-0416	RHSP FEE:\$9.00 RPRF FEE: \$1.00
B. E-MAIL CONTACT AT FILER (optional)	EDHARD M. HOODY
ucc@castlecredit.com	COOK COUNTY RECORDER OF DEEDS
C. SEND ACKNOWLEDGMENT TO: (Name and Address)  CASTLE CREDIT CO HOLDINGS, LLC 20 NORTH WACKER DRIVE #2275 CHICAGO, I', 67606	DATE: 05/08/2020 01:36 PM PG: 1 OF 2  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
1a. INITIAL FINANCING STATEMENT FILE TUMBER UCC1-1902917032 2013-01-29 IL COOK	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS
2. TERMINATION: Effectiveness of the Finanting Statement identified above is	Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 sterminated with respect to the security interest(s) of Secured Party authorizing this Termination
3. ASSIGNMENT (full or partial): Provide name of A signee in item 7a or 7b, a For partial assignment, complete items 7 and 9 and also in note affected collaboration.	
	e with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is
5. PARTY INFORMATION CHANGE:	
Check one of these two boxes.	these three boxes to: ADD name: Complete itemDELETE name: Give record name:
This Change affects Debtor or Secured Party of record item Balor  6. CURRENT RECORD INFORMATION: Complete for Party Information Change  6a. ORGANIZATION'S NAME	r 6b; and item 7a or 7b and item 7c 7a or 7b, and item 7c to be deleted in item 6a or 6b  p ovide c nly one name (6a or 6b)
OR THE MONTH OF CURINATE	
BD. INDIVIDUAL'S SURNAME   FI	REST PERSON LINAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information (7a, ORGANIZATION'S NAME	Change - provide only gne namo (/a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME	Ort.
INDIVIDUAL'S FIRST PERSONAL NAME	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7c. MAILING ADDRESS	STATE POSTAL CODE COUNTRY
COLLATERAL CHANGE: Also check one of these four boxes: ADD co- Indicate collateral:	Dilateral DELETE collateral RESTATE covered collateral ASSIGN collatera
	NDMENT: Provide only <u>one</u> name (9a or 9b) (name of Assignor, if this is an Ass <del>ignment)</del> ne of authorizing Debtor
9a. ORGANIZATION'S NAME  CASTLE CREDIT	SC \
OP .	IRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX

10. OPTIONAL FILER REFERENCE DATA: CONTRACT ID:169091T CR

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FOLLOWINSTRUCTIONS			
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item UCC1-1902917032 2019-01-29 IL CO	1s on Amendment form		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form  12a. ORGANIZATION'S NAME			
CASTLE CREDIT			
OR 12b. INDIVIDUAL'S SURNAME FOTIADIS			
FIRST PERSONAL NAME PETE	·		
ADDITIONAL NAME(S)/IN.T.A(,S)	SUFFIX THE A	OVE SPACE IS FOR FILING OFFICE U	SE ONLY
13. Name of DEBTOR on related financing "cax" nent (Name of a curre one Debtor name (13a or 13b) (use exact, full name do not omit, modify,			13): Provide on
138. ORGANIZATION'S NAME			
OR 13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	75		
	Of County Class	Office	
15. This FINANCING STATEMENT AMENDMENT:	17. Description of real esta	e:	
15. This FINANCING STATEMENT AMENDMENT:	17. Description of real esta s filed as a fixture filing PARCEL NUMB	e: PER:	
15. This FINANCING STATEMENT AMENDMENT:  covers timber to be cut covers as-extracted collateral item.  16. Name and address of a RECORD OWNER of real estate described in item.	17. Description of real esta PARCEL NUME 15-29-110-020-00 LEGAL DESCR L23 B5 Martinda Twnshp: Proviso	e: EER: 00 IPTION: lle Est Unit 2 Nw1/4 S29 T39n	

18. MISCELLANEOUS: