

Doc# 2014247042 Fee \$93.80

# **UCC FINANCING STATEMENT AMENDMENT**

For partial assignment, complete items 7 and 9 and at a ordicate affected collateral in item 8    Continuation References of the financing Statement is deneffed above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is confined for the additional period provided by applicable law	FOL	LOW INSTRUCTIONS			RHSP FEE: \$9	9.00 RPPF FEE: \$1.00	
B. E-MAIL CONTACT AT FILER (eptional)  UCCRIffing electring (working SAMMERCON)  Lien Solutions P.O. Box 29071  Lien Solutio			82 Fax: 818-662-41	41	EDWARD M. M	100DY	
USEND ACKNOWLEDGMENTO: (Name and Address)  Bass - BCM (UCC's)  Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071  Lin INTIAL FINANCING STATEMENT IT. NAMERS P.O. Box 29071 Glendale, CA 91209-9071  Lin INTIAL FINANCING STATEMENT IT. NAMERS P.O. Box 29071  Lin INTIAL FINANCING STATEMENT IT. NAMERS P.O. Box 29071  Lin INTIAL FINANCING STATEMENT IT. NAMERS  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  INTIAL FINANCING STATEMENT INTIAL CONTINUE OF INTIAL CONTINUE O	<b>!—</b>				COOK COUNTY	RECORDER OF DEEDS	
Lien Solutions	J.,	· · · · ·			DATE: 05/21	1/2020 12:59 PM PG: 1	0F 4
P.O. Box 29071 Glendale, CA 91209-9071    ILIL   FIXTURE   THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1s. INTIAL, FINANCING STATEMENT FILE MANBER  OCO20507614 \$2007/2002 CC 1/1 C/C)ck    This FINANCING STATEMENT AMENDMENT is to be filed for recorded of the Planch STATEMENT AMENDMENT is to be filed for recorded of the Planch STATEMENT AMENDMENT is to be filed for recorded of the Planch STATEMENT AMENDMENT is to be filed for recorded of the Planch STATEMENT AMENDMENT is to be filed for recorded of the Planch STATEMENT AMENDMENT is to be filed for recorded of the Planch STATEMENT AMENDMENT is to be filed for recorded of the Planch STATEMENT AMENDMENT is to be filed for recorded of the Planch STATEMENT AMENDMENT is to be filed for recorded of the Planch STATEMENT AMENDMENT is to be filed for recorded of the Planch STATEMENT AMENDMENT is to be security interest(a) of Secured Party authorizing this Termination Conflicts from the ment of the additional period by recorded by amplicable for Planch STATEMENT AMENDMENT is the additional period provided by amplicable for Planch STATEMENT AMENDMENT is the additional period provided by amplicable for Planch STATEMENT AMENDMENT is the additional period provided by amplicable for Planch STATEMENT AMENDMENT is the additional period provided by amplicable for Planch STATEMENT AMENDMENT is the additional period provided by amplicable for Planch STATEMENT AMENDMENT is the additional period provided by the additional period provided period provided by the additional period provided period provided period period period provided period peri	Ç.	SEND ACKNOWLEDGMENT TO: (Name and Address) 8839	9 - BCM (UCC's)				
FIRSTURE  FIRE SMITH: COOK, IL  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1a. INITIAL FINANCING STATEMENT FILE NUMBER  OCCOSOFOTAL 5/53/20/20/20/20/ CO (C) Gook  The FINANCING STATEMENT AMENDMENT is to be filed (for record) corrections of the Filed promotes o	ſ		74395388 —	7	<u> </u>	4-5-2-5-10-10-1	
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1a. INITIAL FINANCING STATEMENT FILE NUMBER  ODD/2005/07614 5/30/2002 CC 0 C o o o o o o o o o o o o o o o o		Glendale, CA 91209-9071	LIL				
In INITIAL FINANCING STATEMENT FILE NUMBER    ID	lı	F	FIXTURE	ı			
0020607614 5/30/2002 CC (I) CC ok    Contracted   Internation   Contract   Internation   Contract   Internation   Contract   Internation   In	ال	File with: Cook, IL	_	┚┃	THE ABOVE SPA	CE IS FOR FILING OFFICE U	ISE ONLY
Statement    Statement   State				1b.	(or recorded) in the REAL	LESTATE RECORDS	
For partial assignment, complete items 7 and 9 and also undeate affected collateral in item 8  4. CONTINUATION: Effectiveness of the Financing Statement Identified above with respect to the security interest(e) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law   5. PARTY INFORMATION CHANGE:  Check are of these two boxes:  ADD name: Complete tem	2. [		fied above is terminated v	with re	spect to the security interest(s)	) of Secured Party authorizing this	Termination
continued for the additional period provided by applicable law    AND Check or a cf these three boxes to:   Check or a cf these three boxes to:   Check or a cf these who boxes:   This Change affacts   Declar or   Secured Party of record   Check or a cf these three boxes to:   This Change affacts   Declar or   Declar	3. [				nee in item 7c and name of A	ssignor in item 9	
Check one of these two boxes: This Change affects   Debtor or   Secured Party of record   Item 6to 65; and ferm 7c and learn 7c   7c or 7b, and from 7c   1c be deleted in item 6a or 6b    6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only are name (8a or 6b)  8a. ORGANIZATIONS NAME  AMALGAMATED BANK OF CHICAGO AS TRUSTEE U/A/D 02.12 1996 KNOWN AS TRUST NO. 5696  6b. INDIVIDUAL'S SURNAME   FIRST PERSONOL, VALUE   ADDITIONAL NAME(SYINITIAL(S)   SUFFIX    7c. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only are name (2 or 7b), fund exact, bill name, do not omit, modify, or abbreviate any part of the Debtor's name)  7a. ORGANIZATION'S NAME   INDIVIDUAL'S SURNAME   INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)   SUFFIX    7b. INDIVIDUAL'S SURNAME   INDIVIDUAL'S SURNAME   INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)   SUFFIX    7c. MAILING ADDRESS   CITY   STATE   POSTAL-COLE   COUNTRY    8c.   COLLIATERAL CHANGE: Also check one of these four boxes:   ADD collateral   DELETE collisteral   RESTATE covered collisteral   ASSIGN collateral indicate collisteral; see attached:  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (8a 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	4. [		fi <sup>re</sup> ed above with respect	to the	security interest(s) of Secured	Party authorizing this Continuation	Statement is
CHANGE frame and/or address: Complete by ADD name. Complete item Service of Beautiful Frame of Beautiful Fra	5. [						
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (8a or 6b)  8a. ORGANIZATION'S NAME AMALGAMATED BANK OF CHICAGO AS TRUSTEE U/A/D 02.12.1996 KNOWN AS TRUST NO. 5696  OR 6b. INDMIDULAL'S SURNAME FIRST PERSONAL, (A) E ADDITIONAL NAME(SYNITIAL(S) SUFFIX  77. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only org. name (7- or 7b) (use exact, full name, do not onld, modify, or abbreviate any part of the Debtor's name)  7a. ORGANIZATION'S NAME  OR 7b. INDIVIDUAL'S ADDITIONAL NAME(SYNITIAL(S)  CITY STATE POSTAL DOUG ASSIGN collateral Indicate collateral: see attached:  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	C	meck one of these two doxes.	Ch.\\JF.name and/	or addi	ress: Complete 👝 ADD nam		
Bit ORGANIZATION'S NAME AMALGAMATED BANK OF CHICAGO AS TRUSTEE U/A/D 02.12.1996 KNOWN AS TRUST NO. 5696  OR  6b. INDIVIDUAL'S SURNAME FIRST PERSONG: WHIC TO CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only org. name (7 × 70) (use exact, full name, do not onat, modify, or abbreviate any part of the Debtor's name)  7c. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only org. name (7 × 70) (use exact, full name, do not onat, modify, or abbreviate any part of the Debtor's name)  7c. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only org. name (7 × 70) (use exact, full name, do not onat, modify, or abbreviate any part of the Debtor's name)  7c. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only org. name (7 × 70) (use exact, full name, do not onat, modify, or abbreviate any part of the Debtor's name)  7c. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only org. name (7 × 70) (use exact, full name, do not onat, modify, or abbreviate any part of the Debtor's name)  7c. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only org. name (7 × 70) (use exact, full name, do not onat, modify, or abbreviate any part of the Debtor's name)  7c. CHANGED OR ADDED INFORMATION: Complete for Assignment or Debtor or De		<u> </u>				and item 7c to be deleted	in item 6a or 6b
OR 6b. INDIVIDUAL'S SURNAME  FIRST PERSON: AN .C.  ADDITIONAL NAME(SYMITIAL(S))  SUFFIX  7c. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Charge - provide only org. name. To 7b) (use exact, but name, do not orad, modify, or sibbreviate any part of the Debtor's name)  7a. ORGANIZATION'S NAME  INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(SYMITIAL(S))  7c. MAILING ADDRESS  CITY  STATE POST/AL SOUE  COUNTRY  8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral: see attached:  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9s 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	6. C		n Change - provide only	ne na	ame (6a or 6b)		
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (2 or 7b) (use exact, full name; do not omit, modity, or abbreviate any part of the Debtor's name)  7. ORGANIZATIONS NAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)  SUFFIX  STATE POSTAL SOUE COUNTRY  8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral: see attached:  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		AMALGAMATÉD BANK OF CHICAGO AS TRU	JSTEE U/A/D 02,1	12,19	996 KNOWN AS TRUS	ST NO. 5696	
7a. ORGANIZATION'S NAME    INDIVIDUAL'S SURNAME	OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSO	iON».	(A) E	ADDITIONAL NAME(SYMITIAL(S)	SUFFIX
OR  76. INDIVIDUAL'S SURNAME  INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)  7c. IMAILING ADDRESS  CITY  STATE  POSTAL DOVE  COUNTRY  8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral  Indicate collateral: RESTATE covered collateral  ASSIGN collateral  See attrached:  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	7. C	HANGED OR ADDED INFORMATION: Complete for Assignment or Party I	Information Change - provide or	only <u>one</u>	name (7: 3/7b) (use exact, full name;	do not omit, modify, or abbreviate any part of	the Debtor's name)
INDIVIDUAL'S ADDITIONAL NAME (SYINITIAL(S)  7c. MAILING ADDRESS  CITY  STATE POSTAL FOUE  COUNTRY  8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral:  see attached:  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		7a. ORGANIZATION'S NAMÉ			C		
INDIVIDUAL'S ADDITIONAL NAME(S)VINITIAL(S)  7c. MAILING ADDRESS  CITY  STATE POSTAL GOUE  COUNTRY  8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral;  see attached:  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	OR	7b. INDIVIOUAL'S SURNAME			0/7		
7c. MAILING ADDRESS  CITY  STATE POSTAL SOCE COUNTRY  8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral: see attached:  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		INDIVIDUAL'S FIRST PERSONAL NAME				S	
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral: see attached:  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		INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S)				155.	SUFFIX
Indicate collateral: see attached:  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	7c.	MAILING ADDRESS	CITY			STATE POSTAL GOLE	COUNTRY
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	8. [	COLLATERAL CHANGE: Also check one of these four boxe	s: ADD collateral		DELETE collateral R	RESTATE covered collateral	ASSIGN collatera
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						,	
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor	566	allacheu.					f.
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor							10
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor							7
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor							1
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor							
	9. N	IAME OF SECURED PARTY OF RECORD AUTHORIZING	THIS AMENDMENT:	Provid	de only <u>one</u> name (9a or 9b) (n	ame of Assignor, if this is an Assign	ment)
I de concrete trans a trans	tf	this is an Amendment authorized by a DEBTOR, check here a. 9a. ORGANIZATION'S NAME	nd provide name of author	orizing l	Debtor		

FIRST PERSONAL NAME

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: AMALGAMATED BANK OF CHICAGO AS TRUSTEE U/A/D 02/12/1996 KNOWN AS TRUST NO.

Prepared by Lien Solutions, P.O. Box 29071, Glendale, CA 91209-9071 Tel (800) 331-3282

SUFFIX

ADDITIONAL NAME(S)/INITIAL(S)

983032879

NATIONAL LIFE INSURANCE COMPANY

OR

74395388

9b. INDIVIDUAL'S SURNAME

2014247042 Page: 2 of 4

# **UNOFFICIAL COPY**

### UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS			
11, INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Ameno 0020607614 5/30/2002 CC IL Cook	iment form		
12, NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Am	nendment form		
12a, ORGANIZATION'S NAME			
NATIONAL LIFE INSURANCE COMPANY			
OR 10- HIDWORDIAN'S CHIDMAN'S			
12b. INDIVIDUAL'S SURNAME		; 	
FIRST PERSONAL NAM'		į	
ADDITIONAL NAME(SVINITIAL( §)	SUFFIX		
700		THE ABOVE SPACE IS FOR FILING OFFICE USE	
<ol> <li>Name of DEBTOR on related financing statemer. (Name of a current Debtor of one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or ab</li> </ol>	frecord required for indexing purp obreviate any part of the Debtor's	poses only in some filing offices - see Instruction item 1 name); see Instructions if name does not fit	I3): Provide only
139. ORGANIZATION'S NAME AMALGAMATED BANK OF CHICAGO AS TRUSTEE L	J/A/D 02/12/1996 KNOV	VN AS TRUST NO. 5696	
OR 13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(SYINITIAL(S)	SUFFIX
		C/O/X/S O/FICO	
15. This FINANCING STATEMENT AMENDMENT:	17. Description	of real estate:	
	s a fixture filing SEE AT	TACHED	
16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):			
IRVING PARK BARTLETT, LLC.			
333 WEST WACKER DRIVE, SUITE 2750	PROPE	RTY DESCRIPTION	
CHICAGO, IL 60606		RTY DESCRIPTION VING PARK RD	
	13, E IR'	RTY DESCRIPTION VING PARK RD, MWOOD,COOK IL 601072930	)
	13, E IR' STREAM	VING PARK RD, MWOOD,COOK IL 601072930	)
	13, E IR' STREAM TAX PAI	VING PARK RD,	)

NATIONAL LIFE INSURANCE

File with: Cook, IL

983032879 L

18. MISCELLANEOUS: 74395388-IL-31 8839 - BCM (UCC's)

2014247042 Page: 3 of 4

# **UNOFFICIAL COPY**

**Debtor: AMALGAMATED BANK OF CHICAGO AS** 

TRUSTEE U/A/D 02/12/1996 KNOWN AS TRUST

NO. 5696

**Exhibit for Real Estate** 

(7) Description of real estate:

Continued

Parcei ID:

P11000L,
OF COOK COUNTY CLERK'S OFFICE 06261170110000, 06261170120000

2014247042 Page: 4 of 4

# **UNOFFICIAL COPY**

## **LEGAL DESCRIPTION**

#### PARCEL 1:

LOTS 1 AND 2 IN THE RESUBDIVISION OF LOT 1 IN IRVING STREAMWOOD SUBDIVISION, BEING A SUBDIVISION OF PART OF THE NORTHWEST 1/4 OF SECTION 26, TOWNSHIP 41 NORTH, RANGE 9 EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED MAY 19, 2000 AS DOCUMENT 00362424 IN THE VILLAGE OF STREAMWOOD, COOK COUNTY, ILLINOIS.

### PARCEL 2:

EASEMENT FOR INGRESS AND EGRESS FOR THE BENEFIT OF PARCEL 1, AS SET FORTH IN GRANT OF EASEMFUT FOR INGRESS AND EGRESS DATED MAY 28, 1998 AND RECORDED JUNE 8, 1998 AS DOCUMENT 32.78194.

### PARCEL 3:

EASEMENT FOR STORM SEWER AND DPAINAGE FOR THE BENEFIT OF LOT 1 OF PARCEL 1 AS SET FORTH IN GRANT OF EASEMENTS FOR STORM SEWER AND DRAINAGE DATED MAY 28, 1998 AND RECORDED JUNE 8, 1998 AS DOCUMENT 98478195.

#### PARCEL 4:

EASEMENTS FOR STORM WATER UTILITY LINES, STYPM DRAINAGE, WATER UTILITY LINES AND SANITARY SEWER LINES FOR THE BENEFIT OF LOT 1 CF PARCEL 1 AS SET FORTH IN EASEMENT AND DEVELOPMENT AGREEMENT DATED JUNE 1, 1998 AND RECORDED JUNE 8, 1998 AS DOCUMENT 98478198.

#### PARCEL 5:

EASEMENTS FOR INGRESS, EGRESS, PARKING AND UTILITY PURPOSES FOR THE BENEFIT OF LOT 1 OF PARCEL 1 AS SET FORTH IN DECLARATION OF EASEMENTS, CONDITIONS AND RESTRICTIONS RECORDED JULY 12, 1999 AS DOCUMENT 99664522.