## **UNOFFICIAL COPY**

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ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX ·

1934 83153

Doc# 2029508113 Fee \$93.00 UCC FINANCING STATEMENT AMENDMENT **FOLLOW INSTRUCTIONS** PHSP FEE:\$9.00 RPRF FEE: \$1.00 A, NAME & PHONE OF CONTACT AT FILER (optional) EDWARD M. MOODY CSC 1-800-858-5294 B, E-MAIL CONTACT AT FILER (optional) COOK COUNTY RECORDER OF DEEDS SPRFiling@cscglobal.com JATE: 10/21/2020 03:10 PM PG: 1 OF 2 C. SEND ACKNOWLEDGMENT TO: (Name and Address) 1934 83153 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Illinois (Cook) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] 1a, INITIAL FINANCING STATEMENT FILE NUMBER (or recorded) in the REAL ESTATE RECORDS 1717913064 06/29/2017 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 ASSIGNMENT (full or partial): Provide name of As Jign e 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 no cate affected collateral in item 8 CONTINUATION: Effectiveness of the Financing Statemen' 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: AND Check onr of mese three boxes to: Check one of these two boxes: DELETE name: Give record name to be deleted in item 6a or 6b This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - pri vide only one name (6a or 6b) 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL MAMI ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Audrey Green 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (a or 7b) / man exact, full name; do not omet, modify, or abbreviate any part of the Debtor's name) 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX POSTAL JO 7c. MAILING ADDRESS CITY STATE COUNTRY 8, COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collaterat CARRIER A/C Condenser M# 24ABB318ABN34010 S# 1617E15715 CARRIER A/C Condenser M# 24ABB342A0N30011 S# 1617E19376 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 MICROF

FIRST PERSONAL NAME

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

10. OPTIONAL FILER REFERENCE DATA: Debtor: Green, Audrey

9b. INDIVIDUAL'S SURNAME

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_	C FINANCING STATEMENT AMI	ENDMENT ADD			
11. 1	NITIAL FINANCING STATEMENT FILE NUMBER: SI 17913064 06/29/2017	ame as item 1a on Amendment for	m .		
12,	NAME OF PARTY AUTHORIZING THIS AMENDMENT	T: Same as item 9 on Amendmen	t form	,	
	12a, ORGANIZATION'S NAME Microf				
OR	12b. INDIVIDUAL'S SURNAME				
	FIRST PERSONAL NAME				
	ADDITIONAL NAME(\$)/INITIAL(5)		SUFFIX	ABOVE SPACE IS FOR FILING OFFICE	USE ONLY
13.	Name of DEBTOR on related financing states ent (Na		equired for indexing purpos	es only in some filing offices - see Instruction item	
	one Debtor name (13a or 13b) (use exact, full na ne; Jo not o 13a. ORGANIZATION'S NAME	xmit, modify, or abbreviate any pa	t of the Debtors name); sec	e instructions if name does not fit	
OR	13b. INDIVIDUAL'S SURNAME Green	FIRST PER Audrey	SONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	ADDITIONAL SPACE FOR ITEM 8 (Collateral): ditional Debtor: Daisie Green-Wilkerso				<u> </u>
Ac				estate: ck 27, Cremin & Brenans Fairvi	ov Port

18. MISCELLANEOUS: RTO-000059058