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Doc#. 2031607163 Fee: \$98.00

Edward M. Moody

Cook County Recorder of Deeds Date: 11/11/2020 11:05 AM Pg: 1 of 3

. E-MAIL CONTACT AT FILER (optional)					
. SEND ACKNOWLEDGMENT TO: (Name and Address)	1				
Sidley Austin LLP					
One South Dearborn	•				
Chicago, IL 60603 Attn: John Cb. m. erlin					
	1				
I. INITIAL FINANCING STATEMENT - II ⊆ NUMBER				R FILING OFFICE USE	
502729073 Filed: 1/27/2015	ľ	(ar recarded) in the Ri	AL ESTATE	ENDMENT is to be filed (for RECORDS rm UCC3Ad) <u>and</u> provide Debto	-
TERMINATION: Effectiveness of the Financing Statement identification of	entified above is terminated wi				
ASSIGNMENT (full or partial): Provide name of Assignee in it For partial assignment, complete items 7 and 9 and itso not call	item 7a or 7b, <u>and</u> address of le affected collateral in item 8	Assignee in item 7c <u>and</u> nam	e of Assignor	in ilem 9	
CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law	iden, fied above with respect t	o the security interest(s) of S	Secured Party	authorizing this Continuation	on Statement is
PARTY INFORMATION CHANGE:					
Check one of these two boxes:	D Check one of "Jese three box		name: Comple	ota ilom DELETE nome:	Cive spaced seem
This Change affects Debtor or Secured Party of record	CHANCE name and/or ac item 6a c / 6b; and item 7a		7b, <u>and</u> item 7	c lo be deleted in i	Give record nam tem 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information 6a. ORGANIZATION'S NAME	mation Change - provide or ly <u>o</u>	ne name (6a or 6b)			
Bb. INDIVIDUAL'S SURNAME	FIRST PERSON	NAME	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
		7%		(.,	
CHANGED OR ADDED INFORMATION: Complete for Assignment of	or Party Information Change - provide or	nly <u>one</u> name , 74 or 7b) (use exact, fu	Il name; do not o	mit, modify, or abbreviate any part o	f the Debtor's name)
7a. ORGANIZATION'S NAME Life Insurance Company of North A	merica	()			
R 75. INDIVIDUAL'S SURNAME	anci lea			***************************************	
			24,		
INDIVIDUAL'S FIRST PERSONAL NAME			0,1		1 146
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			0		SUFFIX
more desired and the least of t				U ₂ C ₂ C	SUFFIX
: MAILING ADDRESS	CITY	•	STATE	POSTAL CUDE	COUNTRY
00 Cottage Grove Road	Bloomfie	1 1	CT	06002	COUNTRY

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11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amend 1502729073 Filed 1/27/2015	dment form		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Am	endment form		
12a. ORGANIZATION'S NAME			
Connecticut General Life Insurance Company			
40			
OR 12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/IN.T'.(L'C)	SUFFIX		
		THE ABOVE SPACE IS FOR FILING OFFICE (
13. Name of DEBTOR on related financing statement (Name of a current Debtor of one Debtor name (13a or 13b) (use exact, full none) do not omit, modify, or abbreviate	record required for indexing pure any part of the Debtor's name)	poses only in some filing offices - see Instruction item ; see Instructions if name does not fit	13): Provide only
13a. ORGANIZATION'S NAME Santa Fe Interests, LLC			
	ST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	of Ferrodina vinc	ASSITISTANE NAME (S)/NATIAE(S)	JOHN
	46		
	ST PERSONAL NAME		
15. This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted collateral is filed as a file. Name and address of a RECORD OWNER of real estate described in item 17	17. Description of r		

18. MISCELLANEOUS:

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EXHIBIT A

Legal Description of Property

Real property in the City of Chicago, County of Cook, State of Illinois, described as follows:

THE SOUTH 15 FEET OF LOT 5 AND SUB LOTS 1 AND 2 OF LOT 8 AND ALL OF LOT 9 IN BLOCK 5 IN FRACTIONAL SECTION 15 ADDITION TO CHICAGO IN THE WEST HALF OF THE NORTHWEST 1/4 OF SECTION 15, TOWNSHIP 39 NORTH, RANGE 14. EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Address: 224 S Michigan Ave., Chicago, IL 60604 Ox Cook County Clark's Offica

PIN: 17-15-105-013-0000