

UCC FINANCING STATEMENT AMENDMENT

A. NAME & PHONE OF CONTACT AT FILER (optional)
Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141

B. E-MAIL CONTACT AT FILER (optional)
uccfilingreturn@wolterskluwer.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Lien Solutions
P.O. Box 29071
Glendale, CA 91209-9071

ILIL
FIXTURE

21 9	2249005

Doc# 2102249005 Fee \$88.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00 KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 01/22/2021 10:20 AM PG: 1 OF 3

File with: Cook, IL	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 1929540024 10/22/2019 CC 1'L Cook	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 Fi tanking Statement identified above is terminate Statement	nated with respect to the security interest(s) of Secured Party authorizing this Termination
 ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and add For partial assignment, complete items 7 and 9 and also indicate affected collateral 	
CONTINUATION: Effectiveness of the Financing Statemer, identified above with recontinued for the additional period provided by applicable law	espect to the security interest(s) of Secured Party authorizing this Continuation Statement is
5. PARTY INFORMATION CHANGE: Check one of these two boxes: This Change affects Debtor or Secured Party of record item be 2.55;	e three boxes to: ne and/or address: Complete ADD name: Complete item DELETE name: Give record name and item 7a or 7b and item 7c 7a or 7b, and item 7c to be deleted in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provid 6a. ORGANIZATION'S NAME	e uniy <u>ne</u> name (6a or 6b)
	T PERSON L PAME ADDITIONAL NAME(SYINITIAL(S) SUFFIX D
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - p 7a. ORGANIZATION'S NAME	provide only one name (75 or 50) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME	C/L
INDIVIDUAL'S FIRST PERSONAL NAME	
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)	SUFFIX
7c. MAILING ADDRESS CITY	STATE POSTAL CODE COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral changes are consistent and collateral changes.	eral DELETE cottateral RESTATE covered collateral ASSIGN 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 OVATION SALES FINANCE TRUST								
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)INITIAL(S)	SUFFIX					

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: SOWERS, TAMELA D

78477024

Indicate collateral:

1523275

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UNOFFICIAL COPY

	C FINANCING STATEMENT AMENDMENT LOW INSTRUCTIONS	T ADDENDL	JM		
	IITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on An 9540024 10/22/2019 CC IL Cook	nendment form			
12. N	12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME OVATION SALES FINANCE TRUST				
OR -	12b. INDIVIDUAL'S SURNAME				
	FIRST PERSONAL NAME				
	ADDITIONAL NAME(SYINITIAL(S)		•	/E SPACE IS FOR FILING OFFICE US	
2	lame of DEBTOR on related financing streem int (Name of a current Debtone Debtor name (13a or 13b) (use exact, rull rame) do not omit, modify, on the ORGANIZATION'S NAME				n 13): Provide onl
OR	136. INDIVIDUAL'S SURNAME SOWERS	FIRST PERSONA	IL NAME	ADDITIONAL NAME(SYINITIAL(S)	SUFFIX
Debt SOV SOV	ADDITIONAL SPACE FOR ITEM 8 (Collateral): for Name and Address: VERS, TAMELA D - 2816 188TH ST, LANSING, IL 60438-3 VERS, STEVEN E - 2816 188TH ST, LANSING, IL 60438-3 ured Party Name and Address:				
	TION SALES FINANCE TRUST - 835 W 6TH ST STE 1440	, AUSTIN, TX 73	7703		
			2		
			(0)	· · · · · · · · · · · · · · · · · · ·	
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				Office	
				.0	
16. N	lame and address of a RECORD OWNER of real estate described in item Debtor does not have a record interest):	ed as a fixture filing	17. Description of real estate: BORROWER L. D. TAMELA	AST/FIRST NAME: \$	SOWERS
281	RENZO PRICE 16 188TH ST NSING, IL 60438-3402		CO- BORROWI SOWERS, E. S	ER LAST/FIRST NAM TEVEN	ΛE:
			APN: 33-06-214	1-041-0000	

18. MISCELLANEOUS: 78477024-IL-31 37724 - OVATION SALES FINANC

OVATION SALES FINANCE TRUST File with: Cook, IL

[See Exhibit for Real Estate]

1523275

Property Description: A PARCEL OF LAND

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Debtor: SOWERS, TAMELA, D

Exhibit for Real Estate

17. Description of real estate:

Continued

LOCATED IN THE STATE OF IL, COUNTY OF COOK, WITH A SITUS ADDRESS OF 2816 188TH ST, LANSING IL 60438-3402 C013 CURRENTLY OWNED BY PRICE LORENZO HAVING A TAX ASSESSOR NUMBER OF 33-06-214-041-0000 AND BEING THE SAME PROPERTY MORE FULLY DESCRIBED AS PART W2 E2 W2 NE4 SEC06 AND DESCRIBED IN DOCUMENT N'UNBER 7055056 DATED 2/4/2013 AND 13. L.

Othnix Clert's Office RECORDED 3/11/2013. LOT: 321 Twnshp-35N

Rng-15E Sec-06

Parcel ID:

APN: 33-06-214-041-0000