UNOFFICIAL COPY

UCC FINANCING STATEMENT AMENDING	IENT	:	*2109257067*	
A. NAME & PHONE OF CONTACT AT FILER (optional)		Doc	:# 2109257067 Fee	\$88,00
CSC 1-800-858-5294				
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com		1	P FEE:\$9.00 RPRF FEE: \$	1.00
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		1	EN A. YARBROUGH	
2068 49296	\neg	,	COUNTY CLERK	
¹csc	į	DATE	E: 04/02/2021 04:32 PM	PG: 1 OF 2
801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Illinois			·
	(Cook)			
		THE ABOVE SPA	CE IS FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 1609544067 04/04/2016	1	(or recorded) in the REAL	MENT AMENDMENT is to be filed (fo ESTATE RECORDS Jendum (Form UCC3Ad) <u>and</u> provide Deb	·
2. TERMINATION: Effectiveness of the Fig.ancia, Statement identifications.	ed above is terminated w	ith respect to the security interes	st(s) of Secured Party authorizing thi	s Termination
3. ASSIGNMENT (full or partial): Provide name of Assignes in item For partial assignment, complete items 7 and 9 and a. vo i di ste aff			f Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statement Jan continued for the additional period provided by applicable law.	titi id above with respect	to the security interest(s) of Sec	ured Party authorizing this Continual	ion Statement is
5. PARTY INFORMATION CHANGE:				
Check one or blese two boxes.	neck ne / it ase three bo CHANC anne and/or a	ddress: CompleteADD nam		Give record name
This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information	item 6a or 3b; and item 7 on Change - provide online		and item 7cto be deleted in	rrem pa or po
6a. ORGANIZATION'S NAMECronin Enterprises, L.L.C.	ST STIGHTS PLOT AND STITLY	12 (44 4 4 4 4 4		
OR CONTROLLED CONTROL				lauceus
6b. INDIVIDUAL'S SURNAME FIRST F		AL VANC	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part	y Information Change – provide o	nty one name (7) or 7b) (use exact, full na	! Ime; do not omit, modify, or abbreviate any part	of the Debtor's name)
7a. ORGANIZATION'S NAME		C		
OR 7b. INDIVIDUAL'S SURNAME			% .	
INDIVIDUAL'S FIRST PERSONAL NAME	· · · · · · · · · · · · · · · · · · ·		10	
INDIVIDUAL'S ADDITIONAL NAME(S)ANITIAL(S)			Oxe	SUFFIX
7c. MAILING ADDRESS	СІТУ		STATE POSTAL CODE	USA
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral R	RESTATE covered collateral	ASSIGN collateral
Indicate collateral:				
		•		
				,
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING T	HIS AMENDMENT: P	rovide only <u>one</u> name (9a or 9b) (r	name of Assignor, if this is an Assignm	ent)
	P. Trust Co	g Debtor		
9a. ORGANIZATION'S NAME Forest Park National Bank	α HuSt CO.			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor: Cronin En	terprises, L.L.C.		l <u>, </u>	2068 49296

UNOFFICIAL COPY

ALTA Commitment (6/18/07 IL v./2006)

First American Title Insurance Company

Commitment No. FA-16-0086

EXHIBIT A

PARCEL 1: THE SOUTH 100 FEET OF LOT 21 IN SAMUEL WATT'S SR. SUBDIVISION OF THE EAST HALF OF THE SOUTHWEST QUARTER OF THE SOUTHWEST QUARTER OF SECTION 12, TOWNSHIP 39 NOPTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, (EXCEPT THE EAST 50 FEET THER SOF AND EXCEPT THE RIGHT OF WAY OF THE CHICAGO AND WISCONSIN RAILWAY), IN COOK COUNTY, ILLINOIS.

PARCEL 2: LOT 6 IN BLOCK & IN GALE AND BLOCK'S SUBDIVISION OF THE WEST HALF OF THE WEST HALF OF THE SOUTHWE'S I OUARTER OF SECTION 12, TOWNSHIP 39 NORTH, RANGE 12, OOT COUNTY CONTY'S OFFICE EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PINS: 15-12-319-011 & 15-12-319-021

First American Title Insurance Company By: O'Connor Title Guaranty, Inc. 162 W. Hubbard Street Chicago, IL 60654 312.527.4700

Email: packages@oconnortitle.com