UNOFFICIAL COPY

|--|

2111108008

Doc# 2111108008 Fee ≇60.00 UCC FINANCING STATEMENT AMENDMENT RHSP FEE:\$9.00 RPRF FEE: \$1.00 **FOLLOW INSTRUCTIONS** KAREN A. YARBROUGH A. NAME & PHONE OF CONTACT AT FILER (optional) Kelsey Knutson 952-356-0100 4.5.2021 COOK COUNTY CLERK B. E-MAIL CONTACT AT FILER (optional) DATE: 04/21/2021 11:48 AM PG: 1 OF 3 kknutson@northmarq.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) NorthMarq Capital 3500 American Blvd. West, Suite 500 Bloomington, MN 55431 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT CP. CITUMBER 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS
Filer. <u>strach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13 1621118090 Date: 7/29/2016 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 Arcignee 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 include affected collateral in item 8 4. ONTINUATION: Effectiveness of the Financing Statemer, ide: 'ffied above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable las 5. PARTY INFORMATION CHANGE: AND Check on a of these three boxes to: Check one of these two boxes: CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c ADD name: Complete item 7a or 7b, <u>and</u> item 7c DELETE name: Give record a to be deleted in item 6a or 6b This Change affects Debtor or Secured Party of record CURRENT RECORD INFORMATION: Complete for Party Information Change - p ovide (nly one name (6a or 6b) 6a, ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME FIRST PERSON AL LANE ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one party (/a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7c. MAILING ADDRESS STATE POSTAL COL COUNTRY COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collate

				1 0	<u> </u>	1
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					7-2 1 B	J
	9a. ORGANIZATION'S NAME Fannic Mae			I	VI .	<u>V</u>
	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFF	<u> SC</u>	! -
10 OPTIONAL FILED REFERENCE DATA:						_

10. OPTIONAL FILER REFERENCE DATA:

Indicate collateral

NMC Loan 530847 - Cook County, IL

International Association of Commercial Administrators Til

UNOFFICIAL COPY

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOWINSTRUCTIONS	ADDLINDON		
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on A 1621118090 Date: 7/29/2016	mendment form	ı	
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 o	n Amendment form		
12a, ORGANIZATION'S NAME			
Fannie Mae			
OR 12b. INDIVIDUAL'S SURNAME			
120. INDIVIDUAL S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INTTA (C)	SUFFIX		
		THE ABOVE SPACE IS FOR FILING OFFICE L	
13. Name of DEBTOR on related financing state tient (Name of a current Debt one Debtor name (13a or 13b) (use exact, full nume do not omit, modify, or abbre	tor of record required for indexing eviate any part of the Debtor's na	g purposes only in some filing offices - see instruction item ame); see instructions if name does not fit	13): Provide only
13a, ORGANIZATION'S NAME 1247-1249 West Madison LLC			
OR 13h INDIVIDIAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):		CONTROL INVITED THE CONTROL OF THE C	
9	-		
	46		
		4	
		`S _	
		V _E C.	
		C	
15. This FINANCING STATEMENT AMENDMENT:	17. Description	ı of real estate;	
	s a fixture filing		
 Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest); 		Address:	
		Throop Place	
1247-1249 West Madison LLC		249 West Madison Street	
1243 West Madison Street	Chicago,	IL 60607	
Chicago, IL 60607			
18. MISCELLANEOUS:			

UNOFFICIAL COP

[Description of the Land]

PARCEL 1:

LOTS 4 AND 5 IN ASSESSOR'S DIVISION OF BLOCK 3 IN CANAL TRUSTEE'S SUBDIVISION OF THE WEST 1/2 AND THE WEST 1/2 OF THE NORTHEAST 1/4 OF SECTION 17, TOWNSHIP 39 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, HELFNOIS

PARCEL 2:

LOT 20 IN THE RESUBDIVISION OF LOT 6 IN ASSESSOR'S DIVISION OF BLOCK 3 IN CANAL TRUSTEF'S SUBDIVISION OF THE WEST 1/2 OF THE WEST 1/2 OF THE NORTHEAST 1/4 OF SECTION :7, AFORESAID ALL IN COOK COUNTY, ILLINOIS

PARCEL 3:

LOTS 1, 4 (ELCEP) THE EAST 4.25 FEET THEREOF), 5, 6 & 7 IN MC CORMICK'S SUBDIVISION OF LOT 6 OF BLOCK 2 OF CANAL TRUSTEE'S SUBDIVISION OF THE WEST 1/2 OF THE WEST 1/2 OF THE NORTHEAST 1/1 OF SECTION 17, AFORESAID ALL IN COOK COUNTY, ILLINOIS

PARCEL 4:

LOTS 2, 3 AND THE EAST 4.25 FET OF LOT 4, IN MC CORMICK'S SUBDIVISION OF LOT 6 OF BLOCK 3 OF CANAL TRUSTEE'S SUBDIVISION OF THE WEST 1/2 OF THE WEST 1/2 OF THE ALL PORTON CONTRACTOR OF THE STATE OF THE ST NORTHEAST 1/4 OF SECTION 17, AFORESALD ALL IN COOK COUNTY, ILLINOIS

PINS: 17-17-105-001-0000

17-17-105-002-0000

17-17-105-003-0000

17-17-105-004-0000

17-17-105-005-0000

17-17-105-006-0000

17-17-105-007-0000

CKA: 1237-1259 W. Madison St., Chicago, 10 60607