

| UCC FINANCING STATEMENT AM FOLLOW INSTRUCTIONS | ENDMENT | , D | oc# 2111610082 Fee | \$93.00 | | | |
|--|--|--|--|--|--|--|--|
| A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800 | 1 | RHSP FEE:\$9.00 RPRF FEE: \$1.00 Karen a. Yarbrough | | | | | |
| B. E-MAIL CONTACT AT FILER (optional) | | | OK COUNTY CLERK | | | | |
| uccfilingreturn@wolterskluwer.com | | | | | | | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Addres | 6111 - FIRST MIDWEST | " " | TE: 04/26/2021 04:11 PM | PG: 1 OF 3 | | | |
| Lien Solutions P.O. Box 29071 | 80073601 | \ | | · | | | |
| Glendale, CA 91209-9071 | ILIL | | | | | | |
| | FIXTURE 1 | | | | | | |
| | | THE ABOVE | SPACE IS FOR FILING OFFICE | E LICE ONLY | | | |
| File w.h: Cook, IL 1a. INITIAL FINANCING STATEMENT -ILE NUMBER | | | TATEMENT AMENDMENT is to be file | | | | |
| 0614235169 5/22/2006 CC iL Cook | | (or recorded) in the | REAL ESTATE RECORDS ent Addendum (Form UCC3Ad) and provide | | | | |
| TERMINATION: Effectiveness of the Fin noing Statem Statement | ent identified above is terminated wif | | | | | | |
| ASSIGNMENT (full or partial): Provide name of As fign For partial assignment, complete items 7 and 9 and all | | | e of Assignor in item 9 | <u> </u> | | | |
| CONTINUATION: Effectiveness of the Financing State continued for the additional period provided by applical | | the security interest(s) of Sec | cured Party authorizing this Continua | tion Statement is | | | |
| 5. PARTY INFORMATION CHANGE: | | ···· | | | | | |
| Check one of these two boxes: | AND Check_of these three bo | | | | | | |
| This Change affects Debtor or Secured Party of reco | ord CH/NC = rame and/or item 6a = 10, and item | | | name: Give record name ted in item 6a or 6b | | | |
| 6. CURRENT RECORD INFORMATION: Complete for Party | Information Change - provide <u>nly o</u> | e name (6a or 6b) | | | | | |
| 6a, ORGANIZATION'S NAME | | | | | | | |
| LIBERTY PLAZA, LLC | | <u> </u> | | | | | |
| 6b. INDIVIDUAL'S SURNAME | FIRST PERSON | VAL N'IMF | ADDITIONAL NAME(S)/INITIAL(S) |) SUFFIX | | | |
| | | | | | | | |
| CHANGED OR ADDED INFORMATION: Complete for Assignm ORGANIZATION'S NAME | ent or Party Information Change - provide only | one name (7a (7.a) (use exact, full | name; do not ómit, modify, or abbreviate any pa | rt of the Debtor's name) | | | |
| | | し | | | | | |
| OR 75. INDIVIDUAL'S SURNAME | | |) | | | | |
| | | | 74, | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | INDIVIDUAL'S FIRST PERSONAL NAME | | | | | | |
| INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S) | | | | SUFFIX | | | |
| | | | //ς. | | | | |
| 7c. MAILING ADDRESS | CITY | | STATE POSTAL COL | COUNTRY | | | |
| 8. COLLATERAL CHANGE: Also check one of these | four boxes: ADD collateral | DELETE collateral | RESTATE covered collateral | ASSIGN collateral | | | |
| Indicate collateral: | | | | s y | | | |
| | | | | | | | |
| | | | | P:3 | | | |
| | | | | 7 | | | |
| | | | | S /- | | | |
| | | | | 1 | | | |
| | | | | M Y | | | |
| 9. NAME OF SECURED PARTY OF RECORD AUTH | ORIZING THIS AMENDMENT: F | Provide only one name (9a or | 9b) (name of Assignor, if this is an Ass | ianment) 🚺 | | | |
| If this is an Amendment authorized by a DEBTOR, check he | re and provide name of authoriz | zing Debtor | - | SC Y | | | |
| 9a. ORGANIZATION'S NAME | | | | - 1 | | | |
| First Midwest Bank | | | | <u>t / </u> | | | |
| OR 9b. INDIVIDUAL'S SURNAME | FIRST PERSON | NAL NAME | ADDITIONAL NAME(S)INITIAL(S | INTEK | | | |
| 10. OPTIONAL FILER REFERENCE DATA: Debtor Nam | e: LIBERTY PLAZA, LLC | | | | | | |

670019730

80073601

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UCC FINANCING STATEMENT AMENDMENT ADDENDUM

| | LOW INSTRUCTIONS | OW | | | |
|---|--|--|--|-------------------|--|
| | NITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 4235169 5/22/2006 CC IL Cook | | | | |
| | NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form | | | | |
| 12a. ORGANIZATION'S NAME First Midwest Bank | | | | | |
| OR | 12b. INDIVIDUAL'S SURNAME | | | | |
| | FIRST PERSONAL NAME | | | | |
| | 20 | | SPACE IS FOR FILING OFFICE US | | |
| 13. | Name of DEBTOR on related financing stat in. > .t (Name of a current Debtor of record require one Debtor name (13a or 13b) (use exact, full name do not omit, modify, or abbreviate any page 15. | d for indexing purposes only in seart of the Debtor's name); see Ins | ome filing offices - see Instruction item structions if name does not fit | 13): Provide only | |
| | 138. ORGANIZATION'S NAME LIBERTY PLAZA, LLC | | | | |
| OR | 13b. INDIVIDUAL'S SURNAME FIRST PERSO | NAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| Det | ADDITIONAL SPACE FOR ITEM 8 (Collateral): otor Name and Address: ERTY PLAZA, LLC - 220 NORTH SMITH STREET, SUITE 30. CALATINE, | IL 60067 | | | |
| | cured Party Name and Address: tt Midwest Bank - 300 Park Blvd Suite 400 , Itasca, IL 60143 | | | | |
| | | Dunit Clay | | | |
| | | C/Q | h. | | |
| | • | | T'S | | |
| | | | Office | | |
| | | | CO | | |
| | This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted collateral is filed as a fixture filing | 17. Description of real estate: SEE ATTACHE | D EXHIBIT A | | |
| | Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): | PIN #31-22-300-048-0000, | | | |
| | | 31-22-300-062,0000 AND 31-22-300-063-0000 | | | |
| | | Parcel ID: | | | |
| | | 31-22-300-048-0 31-22-300-063-0 | 2-300-048-0000, 31 - 22-300-062,0000, 2-300-063-0000 | | |
| | MICCELLANGOUS, 2007/2001 II - 31 - 6111 - FIRST MIDWEST BANK First Midwest Bank | File with: Cook II | 66005 670019730 | | |

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EXHIBIT A

Parcel 1:

LOTS 1 AND 2 IN OWNER'S SUBDIVISION, BEING A SUBDIVISION OF THE NORTH 522.72 FEET OF THE EAST 1/2 OF THE SOUTHWEST 1/4, (EXCEPT THE EAST 899.67 FEET THEREOF AND EXCEPT THE WEST 33 FEET THEREOF AND EXCEPT PART TAKEN FOR LINCOLN HIGHWAY), ALL IN SECTION 22, TOWNSHIP 35 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Parcel 2:

THE NORTH 522.72 FEET OF THE WEST 200.67 FEET OF THE EAST 899.67 FEET OF THE SOUTHWEST 1/4 OF SECTION 22, TOWNSHIP 35 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, (EXCEPT THAT PART TAKEN FOR LINCOLN HIGHWAY), IN COOK COUNTY, ILLINOIS.

Commonly known as: 4515-4561 West Lincoln Highway, Matteson, Illinois 60443

P.I.N.s: 31-22-300-048-00(0, 31-22-300-062-0000 and 31-22-300-063-0000