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UCC FINANCING STATEMENT AMENDME	NT		*2114506038	* 44 14
FOLLOW INSTRUCTIONS		1	Doc# 2114506038 Fe	aa 70% 9
A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294				
B. E-MAIL CONTACT AT FILER (optional)		k	RHSP FEE:\$9.00 RPRF FEE: CAREN A. YARBROUGH	\$1.00
SPRFiling@cscglobal.com			OOK COUNTY CLERK	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		ימ	OTE: OF 10-	
2114 56055 CSÇ			AIE: 05/25/2021 02:31 PM	PG: 1 0F 2
801 Adlai Stevenson Drive			****	<u> </u>
Springfield, IL 62703	led In: Illinois (Cook) I			
L. 6	(00017)	THE ABOVE SP	ACE IS FOR FILING OFFICE USI	EONLY
1a. INITIAL FINANCING STATEMENT OF A NUMBER		1b. This FINANCING STAT	EMENT AMENDMENT is to be filed [f	
1435234092 12/18/2014		(or recorded) in the REA	AL ESTATE RECORES ddendum (Form UCC3Ad) <u>and</u> provide Del	btor's name in item 13
TERMINATION: Effectiveness of the Financing Statement identified at Statement	pove is terminated v	rith respect to the security inter	est(s) of Secured Party authorizing th	is Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or For partial assignment, complete items 7 and 9 and 1/50 nd Juste affected.	r 7b, <u>and</u> address o d collateral in item (Assignee in Item 7c <u>and</u> name	of Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statement den field continued for the additional period provided by applicable lav	above with respect	to the security interest(s) of Se	ecured Party authorizing this Continua	ation Statement is
5. PARTY INFORMATION CHANGE:				
	one of these three bo AN'this warme and/or a		ame: Complète item DELETE name	e: Give record name
	AName and/or and 6a ir 6b; and item			n item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information Ch 6a. ORGANIZATION'S NAME	nange - pr	one name (6a or 6b)		
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	F. N. m. S	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
GIBBS	SHIRLEY	//x	A	
		~//	^	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform]	only <u>one name</u> (va or 7b) (use exact, full		t of the Debtor's name)
]	only <u>one name (va or 7b) (use exact full</u>		t of the Debtor's name)
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform]	only <u>one</u> name (va or 7b) (use exact, full		t of the Debtor's name)
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7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information of Party Inform	mation Change - provide	C	name, do not omit, modify, or abbreviate any par	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information of Party Inform	CITY	DELETE collateral	STATE POSTAL CODE	SUFFIX COUNTRY ASSIGN collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information or Party Inform	CITY	DELETE collateral	STATE POSTAL CODE	SUFFIX COUNTRY ASSIGN collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information of Party Inform	CITY ADD collateral AMENDMENT: F	DELETE collateral	STATE POSTAL CODE	SUFFIX COUNTRY ASSIGN collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Also check one of these four boxes: A Indicate collateral: Windows, roofs, or other home improvement 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS If this is an Amendment authorized by a DEBTOR, check here and provided and p	CITY ADD collateral AMENDMENT: F	DELETE collateral	STATE POSTAL CODE	SUFFIX COUNTRY ASSIGN collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information or Party Inform	CITY ADD collateral AMENDMENT: F	DELETE collateral rovide only <u>one</u> name (9a or 9b) g Debtor	STATE POSTAL CODE	SUFFIX COUNTRY ASSIGN collateral
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information of Party Inform	CITY CITY AMENDMENT: For name of authorizing pressure of authorizing pressur	DELETE collateral provide only <u>one</u> name (9a or 9b) ag Debtor	STATE POSTAL CODE RESTATE covered collateral (name of Assignor, if this is an Assignor)	SUFFIX COUNTRY ASSIGN collateral

2114506038 Page: 2 of 2

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UCC FINANCING STATEMENT AMENDMEN	T ADDENDUM	
FOLLOWINSTRUCTIONS		
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on 7 1435234092 12/18/2014	Amendment form	
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9	on Amendment form	
12a. ORGANIZATION'S NAME Aqua Finance, Inc.		
, iqua i manos, mo	<u> </u>	
00		
OR 12b. INDIVIDUAL'S SURNAME		
FIRST PERSONAL NAME		
· ·		
ADDITIONAL NAME(S)/IN.TL/L/G)	SUFFIX	
700		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
 Name of DEBTOR on related financing flatement (Name of a current Del one Debtor name (13a or 13b) (use exact, full notine do not omit, modify, or abb 	btor of record required for indexing pur	rposes only in some filing offices - see Instruction item 13); Provide onl
13a, ORGANIZATION'S NAME		
Ox		
OR 13b. INDIVIDUAL'S SURNAME GIBBS	FIRST PERSONAL NAME SHIRLEY	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
GIBBS	OTHINGE I	Ŭ
	FIRLEY COUNTY	Clart's Office
15. This FINANCING STATEMENT AMENDMENT:	17. Description of re	eal estate;
	Census Tra Township-F BRANSFIE Legal Book 38-14-29SV Legal Lot: 1 Legal Block Market Area	OOK, IL APN: 20-29-308-011-0000 act / Block: 7102.00 / 5 Alternate APN: Range-Sect: 38-14-29 Subdivision: LD & MCFARLANDS /Page: Map Reference: 025-30-04 / V

18. MISCELLANEOUS: