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KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 08/18/2021 10:11 AM PG: 1 OF 2

## **UCC FINANCING STATEMENT AMENDMENT**

**FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) UCC COORDINATOR (813) 490-3400 B. E-MAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) **ISPC** ,1115 GUNN HWY STE 100

ODESSA FL 33556		THE
1a. INITIAL FINANCING STATEMENT FILE NUMBER 0633310007, NOVEMBER 20, 2006	1b. 🔀	This (or r Filer:
2. TERMINATION: Effectiveness of the ring statement identified above is terminated v	with respect t	o the se

THE ABOVE	SPACE IS	FOR FILING	OFFICE US	SE ONLY

FINANCING STATEMENT AMENDMENT is to be filed [for record]

0633310007, NOVEMBER 25, 250€		Filer: attach Amendment Addendum (Form UCC3Ad) and provide	Debtor's name in item 13
2. TERMINATION: Effectiveness of the rine sting State	ement identified above is terminated with respect to	the security interest(s) of Secured Party authorizing this	Termination Statement
ASSIGNMENT (full or partial): Provide notice of Assistant Assignment, complete items 7 and 9 and assignment.	gnee in item 7a or 7b, <u>and</u> address of Assignee in ite is indicate affected collateral in item 8	em 7c <u>and</u> name of Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statement of the Additional period provided by applications.		interest(s) of Secured Party authorizing this Continuatio	n Statement is
5. PARTY INFORMATION CHANGE:	0-		
Check one of these two boxes:	ND Check one if the se tree boxes to:		
This Change affects: Debtor or Secured Party of record.	CHANGE name and/or address:: Complete item 6a or 5b; and item 7a c 7b and item 7c	ADD name: Complete item DELETE name 7a or 7b, and item 7c to be deleted in ite	ne: Give record name em 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Part	y Information Change - provide only one name (6a c	or 6b)	
6a. ORGANIZATION'S NAME			
OR 5b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NI ME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
WARD	ABIGAIL		
7. CHANGED OR ADDED INFORMATION: Complete for Assign	rment or Party Information Change - provide only one name (/a	or 7b) fire 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		S	:
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		Ox	SUFFIX
7c. MAILING ADDRESS	CITY	STATE POSTAL LOPE	COUNTRY
600 WESTGATE TER	STREAMWOOD	IL 6010720+8	US
8. COLLATERAL CHANGE: Also check one of these four box	es: ADD collateral DELETE collatera	RESTATÉ covered collateral ASSIGN	N collateral.
Indicate collateral Water Conditioner Equipment.			
Secured Party's interest in the collateral, which	is or may become a fixture		
does not extend to the real property to which th	•	16#(11#  # 16## 1	41818 41811 1881 188



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ı					<b>BIE</b> tt		

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 ISPC							
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX				
10	OPTIONAL FILER REFERENCE DATA							

WARD, ABIGAIL ISPC# 691400 COOK IL

CR

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	C FINANCING STATEMENT AMENI	DMENT ADDEND	UM		
11. IN	OW INSTRUCTIONS  WITIAL FINANCING STATEMENT FILE NUMBER: Sam  3310007, NOVEMBER 29, 2006	e as item 1a on Amendment form			
_	AME OF PARTY AUTHORIZING THIS AMENDMENT:	Same as item 9 on Amendment form	n		
<del></del>	12a. ORGANIZATION'S NAME				
•			·		
	40 MDI (CUA) ACCUENTACE	<del></del>			
OR	12b. INDIVIDUAL'S SURNAME				
	FIRST PERSONAL NAME	· • • • • • • • • • • • • • • • • • • •			
	· ADDITIONAL NAME(S)/INITIAL(S)	SUFF	IX .		
				THE ABOVE SPACE IS FOR FILING OFF	FICE USE ONLY
13. Na	ame of DEBTOR on related financing state.nen; Name on Debtor name (13a or 13b) (use exact, full name; Onrionit, r	f a current Debtor of record required	for indexing purposes of	only in some filing offices - see Instruction item	13): Provide only
_	Ba. ORGANIZATION'S NAME	mounty, or abbreviate any part of the	Debior 3 marries, 300 mis	ALLECTOR II FIGURE COOK THE THE	
OR .	Bb. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
- 1	WARD	ABIGAIL	•	ADDITIONAL MANELOJIMITALIOJ	35717
14. A	ODITIONAL SPACE FOR ITEM 8 (Collateral):	0_	· · · ·		
COC	OK IL ISPC# 691400	0/			
•					
DEB	TOR AND OR RECORD OWNER: ABIGAIL	_ WARD & WILLIAM WA	(RD		
SEC	URED PARTY: ISPC		42		
		DED 00T0BED 44 0	144 ANIS		
	ONTINUED IN DOC# 1128434010 RECOR ONTINUED IN DOC# 1626734022 RECOR		2016		
<i>,</i> (0 0	7511111025 III B 5 6 / 1525 1 5 152 1 1 2 5 1				
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15.	This FINANCING STATEMENT AMENDMENT:		17. Description of real	estate:	
16.	Covers timber to be cut covers as-extracted collateral Name and address of a RECORD OWNER of real estate description.		PARCEL ID. 06	3 24 308 045 0000	
	(if Debtor does not have a record interest):		LOT 2181 IN W	OODLAND HEIGHTS UNIT 5,	
	GAIL WARD & WILLIAM WARD LTHEA CIR			3, 24 & 25 ALL IN TWP 41 N R .E MERIDIAN IN COOK COUN	
	LE ROCK, AR722094402			E MERCHANTANA	.,
18. N	IISCELLANEOUS:	···	, <u>.</u> ;		
CO	OK IL ISPC# 691400				