UNOFFICIAL COPY

2134384843

		2134304 0 43	
JCC FINANCING STATEMENT AMENDMEN	T Doc# :	2134304043 Fee ‡ 9	3,00
DLLOWINSTRUCTIONS			
. NAME & PHONE OF CONTACT AT FILER (optional) Vanessa A. Orta 405-236-0003	,RHSP FE	E:\$9.00 RPRF FEE: \$1.0	•
E-MAIL CONTACT AT FILER (optional)	KAREN A	. YARBROUGH	
. E-MAIL CONTACT AT FILER (optional)	соок со	JNTY CLERK	
SEND ACKNOWLEDGMENT TO: (Name and Address)	· DATE: 1	2/09/2021 02:09 PM PG:	1 OF 3
McCoy & Orta, P.C.	_ 7		
100 North Broadway, 26th Floor			
Oklahoma City, CK 73102			
<i>/</i> -	[]		
		E IS FOR FILING OFFICE USE	
INITIAL FINANCING STATEMEN FI'LE NUMBER	1b. This FINANCING STATEMS (or recorded) in the REAL E	ENT AMENDMENT is to be filed [for STATE RECORDS	record]
2124616197 filed 9/3/21		ndum (Form UCC3Ad) <u>and</u> provide Debt	or's name in item 13
TERMINATION: Effectiveness of the Financing Statement identified above Statement	e is terminated with respect to the security interest	s) of Secured Party authorizing this	s Termination
ASSIGNMENT (till) or partial): Provide name of Assignee in item 7a or 7l For partial assignment, complete items 7 and 9 and also in cate affected or		Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statemen identified ab		ed Party authorizing this Continuat	on Statement is
continued for the additional period provided by applicable law			
PARTY INFORMATION CHANGE:			
	of mese three boxes to: or mame and/or address: CompleteADD name	: Complete item DELETE name:	Give record name
This Change affects Debtor or Secured Party of record item 6.	a ir 6b; and item 7a or 7b and item 7c	ad item 7c to be deleted in	
CURRENT RECORD INFORMATION: Complete for Party Information Chan-	ge - pr vide c.ily <u>one</u> name (6a or 6b)		
6a. ORGANIZATION'S NAME	0.		
Co. INCOMEDIALIS CUIDMANG			
6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(\$)/INITIAL(\$)	SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informat	on Change - provide only one name (18 or 7b) thee exact, full nam	e; do not omit, modify, or abbreviate any part	of the Debtor's name)
70 ORCANIZATION'S NAME			
7a. ORGANIZATION'S NAME ACREC 2021-FL 1 LTD	C		
ACREC 2021-FL1 LTD.	C/o		-
ACREC 2021-FL1 LTD.	C/ _{Q//}	>	
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME	C/ _C / _A		
ACREC 2021-FL1 LTD.	C/ _{C/A}	Ś	
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME	C/ _C / _A	Ś	Tsuffix
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME	C/ _Q / _A	<u>S</u>	SUFFIX
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	C/ _C / _A	STATE IPOSTAL LODE	
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS	CITY		COUNTRY
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS aplesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket Sc	uare Grand Cayman	KY1-110?	COUNTRY
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS aplesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket Sc	uare Grand Cayman	KY1-110?	COUNTRY
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS aplesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket Sc	uare Grand Cayman	KY1-110?	COUNTRY
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS aplesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket Sc COLLATERAL CHANGE: Also check one of these four boxes: ADD	uare Grand Cayman	KY1-110?	COUNTRY
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS aplesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket Sc COLLATERAL CHANGE: Also check one of these four boxes: ADD	uare Grand Cayman	KY1-110?	COUNTRY
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS aplesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket Sc COLLATERAL CHANGE: Also check one of these four boxes: ADD	uare Grand Cayman	KY1-110?	COUNTRY
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS aplesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket Sc COLLATERAL CHANGE: Also check one of these four boxes: ADD	uare Grand Cayman	KY1-110?	COUNTRY
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS aplesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket Sc COLLATERAL CHANGE: Also check one of these four boxes: ADD	uare Grand Cayman	KY1-110?	COUNTRY
ACREC 2021-FL1 LTD. 75. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS aplesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket Sc COLLATERAL CHANGE: Aiso check one of these four boxes: ADD	uare Grand Cayman	KY1-110?	COUNTRY
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS aplesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket Sc COLLATERAL CHANGE: Also check one of these four boxes: ADD Indicate collateral:	uare Grand Cayman collateral DELETE collateral RE	KY1-1102 STATE covered collateral	COUNTRY CYM ASSIGN collatera P
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS aplesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket So COLLATERAL CHANGE: Also check one of these four boxes: ADD Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AL If this is an Amendment authorized by a DEBTOR, check here and provide in	uare Grand Cayman collateral DELETE collateral RE	KY1-1102 STATE covered collateral	COUNTRY CYM ASSIGN collatera P
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS apiesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket So COLLATERAL CHANGE: Also check one of these four boxes: ADD Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AI If this is an Amendment authorized by a DEBTOR, check here and provide in the second authorized of the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR.	Juare Grand Cayman DELETE collateral RE	KY1-1102 STATE covered collateral	COUNTRY CYM ASSIGN collatera P
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS aplesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket Sc COLLATERAL CHANGE: Also check one of these four boxes: ADDITIONAL NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AIR If this is an Amendment authorized by a DEBTOR, check here and provide in the second surface of the second authorized by a DEBTOR, check here and provide in the second surface in the second	JUARE Grand Cayman DELETE collateral RE DENDMENT: Provide only one name (9a or 9b) (name of authorizing Debtor	KY1-110:2 STATE covered collateral	COUNTRY CYM ASSIGN collatera P S S H IN
ACREC 2021-FL1 LTD. 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS apiesFS Ltd., P.O. Box 1093, Boundary Hall, Cricket So COLLATERAL CHANGE: Also check one of these four boxes: ADD Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AI If this is an Amendment authorized by a DEBTOR, check here and provide in the second authorized of the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR, check here and provide in the second authorized by a DEBTOR.	CITY Grand Cayman Collateral DELETE collateral RE MENDMENT: Provide only one name (9a or 9b) (name of authorizing Debtor	KY1-1102 STATE covered collateral	COUNTRY CYM ASSIGN collateral P S S

UNOFFICIAL COPY

UCC FINANCING STATEMENT AMENDMENT ADDE	NDUM			
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form # 2124616197 filed 9/3/21				
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment	orm			
12a, ORGANIZATION'S NAME ACREC LOAN SELLER LLC				
OR				
126. INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INT MAL(S)	SUFFIX THE ABOVE	ESPACE IS FOR FILING OFFICE U	JSE ONLY	
13. Name of DEBTOR on related financing state lient (Name of a current Debtor of record record record Debtor name (13a or 13b) (use exact, full numer do not omit, modify, or abbreviate any part	uired for indexing purposes only in	some filing offices - see Instruction item		
13a. ORGANIZATION'S NAME UNIVERSITY VILLAGE OWNER, LLC				
OR 13b. INDIVIDUAL'S SURNAME FIRST PERSO	DNAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):				
4				
	Y/)x			
	6/2			
	(0)			
		- /		
13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):				
		Office		
•		0		
	1			
15. This FINANCING STATEMENT AMENDMENT: Covers timber to be cut Covers as-extracted collateral is filed as a fixture filing	17. Description of real estate:	y more specifically descril	ned on	
16. Name and address of a RECORD OWNER of real estate described in item 17	Exhibit "A", attached	hereto and made a part l	nereof	
(if Debtor does not have a record interest):				
		s): 1435 West 15th Street,	Chicago,	
	IL 60608			
40 MIGOGIL ANGOLIS.				
18. MISCELLANEOUS:				

2134304043 Page: 3 of 3

UNOFFICIAL COPY

EXHIBIT A

LEGAL DESCRIPTION

The land referred to in this Policy is described as follows:

All the following described real estate, situated in the County of Cook and State of Illinois known and described as follows, to wit.

The West 12.60 feet of Lot 13 and all of Lots 14 through 25, both inclusive, in Block 14 in Sampson and Green's Subdivision of Block 2 to 6 and 11 to 14 all Inclusive in Sampson and Green's Addition to Chicago, a subdivision of the northwest 1/4 of Section 20, Township 39 North, Range 14, East of the Third Principal Meridian (Except 5 acres in the northwest corner of the East 1/2 of said tract), all in Cook County, Illinois 101, 17-2.

OF COOK COUNTY CLOTH'S OFFICE

Parcel ID's: 17-20 127 001, 17-20-127-002 and 17-20-127-017

Reference No.: 3259.020 Matter Name: The Otis Pool: ACREC 2021-FL1