| UCC FINANCING STATEMENT AMENDME FOLLOWINSTRUCTIONS   | :NT                                       | Do                                 | *2203525028*<br>oc# 2203525028 Fee   | *93,00                |
|--|---|------------------------------------|--|-----------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294  | <del></del>                               | ]                                  | SP FEE:\$9.00 RPRF FEE: \$   |                       |
| B. E-MAIL CONTACT AT FILER (optional)  |   | -1                                 | REN A. YARBROUGH   | 1.00                  |
| SPRFiling@cscglobal.com  |   |                                    | OK COUNTY CLERK  |                       |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address)  |   |                                    | TE: 02/04/2022 11:13 AM  | PG: 1 0F 3            |
| 2258 80530   |   | ,                                  | The state of the s | 10. 10. 3             |
| CSC<br>801 Adlai Stevenson Drive   |   |                                    | and the second s |                       |
| Springfield, IL 62703  | iled In: Illinois                         |                                    |  |                       |
|  | (Cook)                                    |                                    |  |                       |
| 1a. INITIAL FINANCING STATEMENT ALL AUMBER   |   |                                    | ACE IS FOR FILING OFFICE USE<br>EMENT AMENOMENT is to be filed [for  |                       |
| 0708822014 03/29/2007  |   | (or recorded) in the RE            | AL ESTATE RECORDS<br>Addendum (Form UCC3Ad) and provide Deb  | •                     |
| TERMINATION: Effectiveness of the Fi and g Statement identified Statement  | above is terminated v                     |                                    |  |                       |
| ASSIGNMENT (full or partial): Provide name of Assignee in item 7a     For partial assignment, complete items 7 and 9 and also institute affect   |   |                                    | e of Assignor in item 9  |                       |
| 4. CONTINUATION: Effectiveness of the Financing Statemen' identified continued for the additional period provided by applicable lav  | d above with respect                      | to the security interest(s) of \$  | ecured Party authorizing this Continua   | tion Statement is     |
| 5. PARTY INFORMATION CHANGE:   |   |                                    |  |                       |
| Crieck <u>orie</u> of triess two boxes.  | one of these three b                      | address: CompleteADD n             | ame: Complete item DELETE name   | : Give record name    |
| This Change affects Debtor or Secured Party of record into 6. CURRENT RECORD INFORMATION: Complete for Party Information Com | em 6a r 6b; and item                      | 7a or 7b <u>and</u> item 7c7a or 7 | b, and item 7c to be deleted in  | item 6a or 6b         |
| 6a. ORGANIZATION'S NAMEBATEY JOCKLYN L.  | nange - pr                                | one name (oa or oo)                |  |                       |
| OR CLUBIOUS DIAL IS CUMPANAS   |   |                                    |  |                       |
| 6b. INDIVIDUAL'S SURNAME   | FIRST PERSON                              | ni _ N/w .                         | ADDITIONAL NAME(S)/INITIAL(S)  | SUFFIX                |
| 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inf  |   |                                    |  | of the Debtor's name) |
| 7a. ORGANIZATION'S NAME Community Loan Servicing, L  | LC, I/k/a Bay                             | view Loan Servicing                | , LLC  |                       |
| 7b. INDIVIDUAL'S SURNAME   |   | (0)                                | <b>Z</b> .   |                       |
| INDIVIDUAL'S FIRST PERSONAL NAME   |   | •                                  | 5  |                       |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)   |   |                                    |  | SUFFIX                |
|  |   |                                    | ///  |                       |
| 7c. MAILING ADDRESS 4425 Ponce De Leon Blvd., 5th Flo  | or Coral Gat                              | oles                               | FL 33146   | USA                   |
| 8. COLLATERAL CHANGE: Also check one of these four boxes:  | ADD collateral                            | DELETE collateral                  | RESTATE covered collateral   | SSIGN collateral      |
| Indicate collateral;   |   |                                    | ,  | 2                     |
|  |   |                                    |  | 3                     |
| •  |   |                                    |  | 3 Y-L                 |
|  |   |                                    | 4  | SC V                  |
|  |   |                                    | •  | 30 <u>7</u>           |
| A NAME OF OUR PROPERTY - PERCENT   |   |                                    |  | NIEK                  |
| <ol> <li>NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS         If this is an Amendment authorized by a DEBTOR, check here</li></ol>   | S AMENDMENT; Fi<br>ide name of authorizia |                                    | i (name of Assignor, if this is an Assignm   | ient) J               |
| 9a. ORGANIZATION'S NAMEBAYVIEW LOAN SERVICING  |   |                                    |  |                       |
| OR INDIVIDUAL IS SUBMANTS  | I suppose services                        |                                    |  | Lovern                |
| 9b. INDIVIDUAL'S SURNAME   | FIRST PERSON                              | IAL NAME                           | ADDITIONAL NAME(S)/INITIAL(S)  | SUFFIX                |
| 10. OPTIONAL FILER REFERENCE DATA: Debtor: BATEY JOC   | KLYN L.                                   |                                    | <u> </u>   | 2258 80530            |

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### UCC FINANCING STATEMENT AMENDMENT ADDENDUM

| m<br>form   |   |  |  |  |  |  |
|---|---|--|--|--|--|--|
| form  |   |  |  |  |  |  |
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| OUEEW   |   |  |  |  |  |  |
|   | ABOVE SPACE IS FOR FILING OFFICE U  | JSE ONLY   |  |  |  |  |
|   |   | 13): Provide only  |  |  |  |  |
| <u>`</u>  |   |  |  |  |  |  |
|   | ADDITIONAL NAME(S)/INITIAL(S)   | SUFFIX   |  |  |  |  |
| BATEY JOCKLYN L. SECURE PARTY BAYVIEW LOAN SERVICING, LLC |   |  |  |  |  |  |
| tax id 21-31-11<br>property<br>8128 S Essex               | 7-020-0000<br>Ave   |  |  |  |  |  |
|   | aguired for indexing purpose to of the Debtor's name); see  SONAL NAME YN  17. Description of real et see attached tax id 21-31-11 property 8128 S Essex Chicago, IL 60 | THE ABOVE SPACE IS FOR FILING OFFICE to equired for indexing purposes only in some filing offices - see Instruction item to the Debtor's name); see Instructions if name does not fit  SONAL NAME  YN  ADDITIONAL NAME(S)/INITIAL(S)  L  17. Description of real estate: see attached  tax id 21-31-117-020-0000 property 8128 S Essex Ave Chicago, IL 60617 |  |  |  |  |

2203525028 Page: 3 of 3

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### EXHIBIT "A"

### LEGAL DESCRIPTION:

THE SOUTH 20 FEET OF LOT 10 AND ALL OF LOTS 11 AND 12 IN BLOCK 1 IN JAMES R. MCCORTNEY'S SUBDIVISION OF THE WEST 1/2 OF THE SOUTHWEST 1/4 OF THE NORTHWEST 1/4 OF SECTION 31, TOWNSHIP 38 NORTH, RANGE 15, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

STREET ADDRESS: 8124-28 SOUTH ESSEX AVENUE

COUNTY: COOK CITY: CHICAGO ZIP CODE: 60617

TAX NUMBER: 21-31-117-020-0000

Ex.
C: Ch.
MUMBER

Clarks
Office