UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-3	31-3282 Fax: 818-662-4141
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	11729 - Capital One
Lien Solutions P.O. Box 29071	85035047
Glendale, CA 91209-9071	ILIL
	FIXTURE
File vith Cook, IL	

2205640054
Doc# 2206840054 Fee \$93.00
RHSP FEE:\$9.00 RPRF FEE: \$1.00 KAREN A. YARBROUGH
COOK COUNTY CLERK
DATE: 03/09/2022 04:00 PM PG: 1 OF 3

1a. INITIAL FINANCING STATEMENT F' .E N UMBER	1b. This I
1723045047 8/18/2017 CC IL Cupl	(or re
	Filer:

FINANCING STATEMENT AMENDMENT is to be filed [for record]

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1723045047 8/18/2017 CC IL Cuni	(or recorded) in the Filer: attach Amend	he REAL ESTATE RECORDS Iment Addendum (Form UCC3Ad) <u>and</u> provide Debi	or's name in item 13
. TERMINATION: Effectiveness of the Financiar, Scatement identified Statement	above is terminated with respect to the security in	terest(s) of Secured Party authorizing this To	ermination
. ASSIGNMENT (full or partial): Provide name of Assig (ee in item 7a For partial assignment, complete items 7 and 9 and also indicate at		me of Assignor in item 9	
. CONTINUATION: Effectiveness of the Financing Statement id ntifle continued for the additional period provided by applicable law	ed above with respect to the security interest(s) of S	Secured Party authorizing this Continuation	Statement is
. PARTY INFORMATION CHANGE: Check one of these two boxes: This Change affects Debtor or Secured Party of record		ADD name: Complete itemDELETE name /a or 7b, <u>and</u> item 7cto be deleted in	: Give record name item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information C	hange - provide আণু <u>আ</u> ণু name (6a or 6b)		
6a. ORGANIZATION'S NAME CMK Westchester, LLC	40		
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAV.E	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Infor	mation Change - provide only one name (7a or 7b) (use ex.ct,	full name; do not omit, modify, or abbreviate any part of the	he Debtor's name)
7a. ORGANIZATION'S NAME		9	
7b. INDIVIDUAL'S SURNAME		4.0	
INDIVIDUAL'S FIRST PERSONAL NAME		Ox	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		7/6	SUFFIX
7G. MAILING ADDRESS	СПҮ	STATE POSTAL COST	COUNTRY
COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collateral DELETE collateral	RESTATE covered collateral	ASSIGN collateral
			9_1
	,		F J

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 Capital One, National Association, as Administrative Agent OR 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: CMK Westchester, LLC

85035047

33312

4000306444; 4000302826;

2206840054 Page: 2 of 3

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UCC FINANCING STATEMENT AMENDMENT ADD FOLLOW INSTRUCTIONS	ENDUM		
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment 1723045047 8/18/2017 CC IL Cook	form		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendm	ent form	·	
12a. ORGANIZATION'S NAME			
Capital One, National Association, as Administrative Agent			
•			
OR 12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
0,			
ADDITIONAL NAME(SYINITIAL(S)	SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE USE ON:	_Y
13. Name of DEBTOR on related financing statemen' (Name of a current Debtor of record	required for indexing	purposes only in some filing offices - see Instruction item 13): I	
one Debtor name (13a or 13b) (use exact, full name: de not omit, modify, or abbrevia	te any part of the Debi	or s name); see instructions it name does not lit	
CMK Westchester, LLC			
OP	T PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	UFFIX
CMK Westchester, LLC - 181 West Madison Street Suite 4700, Chic Igo, Secured Party Name and Address: Capital One, National Association, as Administrative Agent - Two Bethese		ruite 600 , Bethesda, MD 20814	
15. This FINANCING STATEMENT AMENDMENT: ☐ covers timber to be cut ☐ covers as-extracted collaterat ☐ is filed as a fixt 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):	THE S FEET EAST 1/2 OF 30, TO	ion of real estate: EL 1: SOUTH 150 FEET OF THE NORT OF THE EAST 495 FEET, EXCER 50 FEET THEREOF, OF THE SO THE NORTHEAST 1/4 OF SECT OWNSHIP 39 NORTH, RANGE 12 HE THIRD PRINCIPAL MERIDIAN	PT TH UTH ION , EAS

Prepared by Lien Solutions, P.O. Box 29071, Glendale, CA 91209-9071 Tel (800) 331-3282

33312 4000306444; 4000302826; 4000303906

[See Exhibit for Real Estate]

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT ADDENDUM (Form UCC3Ad) (Rev. 04/20/11)

18. MISCELLANEOUS: 85035047-IL-31 11729 - Capital One Collater

2206840054 Page: 3 of 3

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Debtor: CMK Westchester, LLC

Exhibit for Real Estate

17. Description of real estate:

Continued

PARCEL 2:

EASEMENTS FOR THE BENEFIT OF PARCEL 1 AS CREATED BY CROSS EASEMENT, ACCESS AND MAINTENANCE AGREEMENT MADE BY AND BETWEEN 2450 S. WOLF ROAD, LLC AND TDK REAL ESTATE VENTURE LAND, LLC DATED DECEMBER 8, 2014 AND RECORDED DECEMBER 14, 2014 AS Olynny Clark's Office DOCUMENT NUMBEr, 1434619165.

Parcel ID: 15-30-201-014-0000