Doc# 2207333018 Fee \$93.00

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294 B. E-MAIL CONTACT AT FILER (optional)

RHSP FEE:\$9.00 RPRF FEE: \$1.00 KAREN A. YARBROUGH COOK COUNTY CLERK DATE: 03/14/2022 02:00 PM PG: 1 OF 2

S	SPRFiling@cscglobal.com					
C. S	END ACKNOWLEDGMENT TO: (Name and Address)		1			199.4
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	CSC	I			•	
	301 Adlai Stevenson Drive					
5	Springfield, IL £2703 Filed	l In: Illinois				
1		(Cook)				
L	-		THE ABOVE SPACE	CE IS FOR FIL	ING OFFICE USE	ONLY
	NITIAL FINANCING STATEMENT FILE NUMBER	ŀ	1b. This FINANCING STATEM	IENT AMENOM	ENT is to be filed [for	record]
212	23742007 08/25/2021		(or recorded) in the REAL Filer, attach Amendment Add	ESTATE RECO	RDS	
2. 🗸	TERMINATION: Effectiveness of the mancing Statement identified above Statement	e is terminated w	with respect to the security interes	t(s) of Secured	Party authorizing this	Termination
3.	ASSIGNMENT (full or partial): Provide name or Assignee in item 7a or 7 For partial assignment, complete items 7 and \ar_s \cdots_o indicate affected or			Assignor in ite	m 9	
4	CONTINUATION: Effectiveness of the Financing Statumen, identified at continued for the additional period provided by applicat a law	ove with respect	to the security interest(s) of Secu	red Party autho	orizing this Continuation	on Statement is
5.	PARTY INFORMATION CHANGE:					
Ch		of these three bo		a: Complete it	n DELETE sees	Give record some
Th.	is Change affects Debtor of Secured Party of record ite 16	a or 65 and item 7	ddress: Complete /a or 7b <u>and</u> item 7c7a or 7b, j	e: Complete iter and item 7c	to be deleted in i	Give record name tem 6a or 6b
_	URRENT RECORD INFORMATION: Complete for Party Information Chan	g - prov.de only g	one name (6a or 6b)			
1	5a. ORGANIZATION'S NAME	O .				
~ [•		<u> </u>			
OR (Bb. INDIVIDUAL'S SURNAME	FIRST PERSON	ALT AME	ADDITIONAL N	IAME(S)/INITIAL(S)	SUFFIX
_	HANGED OR ADDED INFORMATION: Complete for Assignment or Party Informat	ion Change - provide c	only ame (7a or 7h) (use exact, full nar	ne; do not omit, mod	ify, or abbreviate any part o	the Debtor's name)
]	7a, ORGANIZATION'S NAME					
OR -						
	7b. INDIVIDUAL'S SURNAME					
]_	INDIVIDUALIO FIDOT DEDCONAL MANE			/		
	INDIVIDUAL'S FIR\$T PERSONAL NAME		,	\mathcal{S}		
-	INDIVIDUALIS ADDITIONAL NAME/SY/NITTAL/SA					Terreix
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				\$0.	SUFFIX
7c. M	AILING ADDRESS	CITY		STATE POS	T/LCODE	COUNTRY
8.	COLLATERAL CHANGE: Also check one of these four boxes: ADD	collateral	DELETE collateral R	ESTATE covere	d collateral	SSIGN collateral
	Indicate collateral:					C.
	e following described property as set forth in that of					
bet	ween Advantage Alliance Pro LLC and the Debtor	: A AO SMI	TH water heating com	iponent, M	lodel #GCG50) (Serial #
204	18122083100) and a PEERLESS air conditioner, N	lodel # MIO	5SPRKWPCN (Serial	# 514411	3), whether no	w owned 8
or r	nereatter acquired, together with all replacements t	inereot, all a	attacnments, accesso	ries, parts	and tools belo	onging
	reto or for use in connection therewith; and any an					
not	limited to, any claims to any items referred to in the	is definition	n, and any claims of D	ebtor agai	nst third partie	
0 1	AME OF SECURED DARTY OF BECORD AUTHORIZING THIS A	JENDMENT: -			Makin in an Annin	- O
	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AF this is an Amendment authorized by a DEBTOR, check here ☐ and provide r	MENUMENT: P name of authorizin		ame of Assignor	, o cais is an Assignme	iii)
	Ba. ORGANIZATION'S NAME Advantage Alliance Pro LLC		.p = -3.00			<u> </u>
	, wrankago / ananoo i to LEO					
- 1						
OR [Bb. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL N	IAME(S)/INITIAL(S)	SUFFIX IC

10. OPTIONAL FILER REFERENCE DATA: Debtor: CANO, ROBERTO

2207333018 Page: 2 of 2

UNOFFICIAL COPY

1. INITIAL FINANCING STATEMENT FIT 2123742007 08/25/2021	LE NUMBER: Same as item 1a on	Amendment form			
2. NAME OF PARTY AUTHORIZING TH	S AMENDMENT: Same as item 9	on Amendment form			
12a. ORGANIZATION'S NAME Advantage Alliance Pro LL					
, taramago , smantos , ro 22	<u> </u>				
DR					
12b. INDIVIDUAL'S SURNAME					
FIRST PERŜO, L. NAME					
6	· · · · · · · · · · · · · · · · · · ·				
ADDITIONAL NAME(5)/PTIAL(S)		SUFFIX			
3. Name of DEBTOR on related timer.cin	a statement (Name of a current Di	abtor of record required for index		S FOR FILING OFFICE	
one Debtor name (13a or 13b) (use exact,	· ·	·			1 13). P1011111111111
13a. ORGANIZATION'S NAME					•
OR 135 INDIVIDUAL'S SURNAME	U)x	FIRST PERSONAL NAME	IADDITIO	ONAL NAME(S)/INITIAL(S)	SUFFIX
CANO		ROBERTO			John M.
4. ADDITIONAL SPACE FOR ITEM 8 (C	ollateral):		•		
5009 W PATTERSON AVE C THIS FILING IS MADE FOR I	HICAGO, IL 60641-34 NOTICE PURPOSES (14 ONLY. THE DEFIOI	is located at address R HAS NO OWNER		THE
0009 W PATTERSON AVE C	HICAGO, IL 60641-34 NOTICE PURPOSES (14 ONLY, THE DESTOR	R HAS NO OWNER		THE
5009 W PATTERSON AVE C THIS FILING IS MADE FOR I	HICAGO, IL 60641-34 NOTICE PURPOSES (14 ONLY, THE DESTOR	R HAS NO OWNER	SHIP RIGHTS IN	THE
5009 W PATTERSON AVE C THIS FILING IS MADE FOR I	HICAGO, IL 60641-34 NOTICE PURPOSES (14 ONLY, THE DESTOR	R HAS NO OWNER		THE
5. This FINANCING STATEMENT AMENDMEN	HICAGO, IL 60641-34 NOTICE PURPOSES (R IS LEASING THE CO	14 DNLY. THE DEFTOI DLLATERAL.	R HAS NO OWNER	SHIP RIGHTS IN	
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5. This FINANCING STATEMENT AMENDMEN COLLATERAL. THE DEBTOR 5. This FINANCING STATEMENT AMENDMEN covers timber to be cut covers to cover a RECORD OWNER ROBERTO CANO 1009 W PATTERSON AVE	HICAGO, IL 60641-34 NOTICE PURPOSES (R IS LEASING THE CO	14 DNLY. THE DEFTOR DLLATERAL. 17. Description A PARC COUNT 5009 W C030 C	R HAS NO OWNER	ATED IN THE ST. A SITUS ADDRE	ATE OF IL, ESS OF 1641-3414
5. This FINANCING STATEMENT AMENDMEN COLLATERAL. THE DEBTOR TO COVERS timber to be cut covers to covers of a RECORD OWNER (If Debtor does not have a record interest): ROBERTO CANO	HICAGO, IL 60641-34 NOTICE PURPOSES (R IS LEASING THE CO	14 DNLY. THE DEFTOR DLLATERAL. 17. Description A PARI COUNT 5009 W C030 C HAVING 13-21-2	R HAS NO OWNER CEL OF LAND LOC Y OF COOK, WITH PATTERSON AVE URRENTLY OWNE A TAX ASSESSO 29-017-0000 AND	ESHIP RIGHTS IN EATED IN THE STATES ADDRESS, CHICAGO IL 60 ED BY CANO MARON NUMBER OF BEING THE SAME	ATE OF IL, ESS OF 1641-3414 RIA P
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