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2220947008

CC FINANCING STATEMENT AMEND		20	c# 2220947008	ree \$60 00
	MENT			
LLOWINSTRUCTIONS			P FEE:\$9.00 RPRF F	EE: \$1.00
NAME & PHONE OF CONTACT AT FILER (optional)		KAR	EN A. YARBROUGH	
Vanessa A. Orta 405-236-0003		C00	K COUNTY CLERK	
E-MAIL CONTACT AT FILER (optional)		DAT	E: 07/28/2022 09:32	? AM PG: 1 0
SEND ACKNOWLEDGMENT TO: (Name and Address)				
— McCoy & Orta, P.C.	コー			
100 North Broadway, 26th Floor				
Oklahoma City, QK 73102				
	1			
	<u> </u>	THE ABOVE SPACE IS F	OR FILING OFFICE USE	ONLY
INITIAL FINANCING STATEMEN 1 FILE NUMBER 2200519005 filed 1/5/22	. 1b. ∠	"(or recorded) in the REAL ESTATE	RECORDS	•
TERMINATION: Effectiveness of the Fine ring Statement ider	ntified above is terminated with re	Filer: attach Amendment Addendum (F spect to the security interest(s) of S		
Statement				
/ ASSIGNMENT (till) or partial): Provide nemp of Assignee in its For partial assignment, complete items 7 and 9 and f.so indicate	em 7a or 7b, <u>and</u> address of Assig affected collaterat in item B	nee in item 7c <u>and</u> name of Assigno	or in item 9	
CONTINUATION: Effectiveness of the Financing Statument le continued for the additional period provided by applicable law	dentified above with respect to the	security interest(s) of Secured Part	y authorizing this Continuation	on Statement is
PARTY INFORMATION CHANGE:				
heck <u>one</u> of these two boxes: AND	Check une of these three boxes to			
his Change affects Debtor or Secured Party of record	item 6. c où; and item 7a or 7	s: Complete ADD name: Comp b and item 7c 7a or 7b, and item		Give record name tem 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Inform	nation Change - provide only one na	me (6a or 6b)		
6a, ORGANIZATION'S NAME				
	<u> </u>			
6b INDIVIDUAL'S SURNAME	FIRST PERSOI AL 4	ME ADDITIO	ONAL NAME(S)/INITIAL(S)	SUFFIX
		<u> </u>		
CHANGED OR ADDED INFORMATION: Complete for Assignment or 7a. ORGANIZATION'S NAME	Party Information Change - provide only one	name 12 7b) (use exact, full name; do not	omit, modify, or abbreviate any part of	the Debtor's name}
LMF COMMERCIAL, LLC				
7b. INDIVIDUAL'S SURNAME	<u> </u>			
		(Va.		
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S FIRST PERSONAL NAME		76		
INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		Ťý.		SUFFIX
INDIVIDUÁL'S ADDITIONAL NAME(S)/INITIAL(S)		76	O _x ,	SUFFIX
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS	CITY	STATE	POST/ CO/DE	SUFFIX
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS	CITY New York	STATE	POST/LC/DE 10022	
	New York	NY	10027	COUNTRY
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 30 Madison Ave., 9th FI. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	New York	NY ELETE collateral RESTATE	10022 Covered collateral A	COUNTRY USA SSIGN collateral
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 90 Madison Ave., 9th FI. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	New York ADD collateral THIS AMENDMENT: Provide	RESTATE Only one name (9a or 9b) (name of A	10022 Covered collateral A	COUNTRY USA SSIGN collateral
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 10 Madison Ave., 9th FI. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	New York	RESTATE Only one name (9a or 9b) (name of A	10022 Covered collateral A	COUNTRY USA SSIGN collateral
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS O Madison Ave., 9th FI. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: NAME of SECURED PARTY of RECORD AUTHORIZING this is an Amendment authorized by a DEBTOR, check here and an Organization's NAME	New York ADD collateral THIS AMENDMENT: Provide	RESTATE Only one name (9a or 9b) (name of A	10022 Covered collateral A	COUNTRY USA SSIGN collateral S (2)
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 0 Madison Ave., 9th FI. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: IAME of SECURED PARTY of RECORD AUTHORIZING this is an Amendment authorized by a DEBTOR, check here and an ORGANIZATION'S NAME RMF SUB 2, LLC	New York ADD collateral B THIS AMENDMENT: Provide and provide name of authorizing Deb	RESTATE Only one name (9a or 9b) (name of Astor	covered collateral A	COUNTRY USA SSIGN collateral S 11)
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 10 Madison Ave., 9th FI. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: NAME of SECURED PARTY of RECORD AUTHORIZING this is an Amendment authorized by a DEBTOR, check here and an open and an open and an open and an open and authorized by a DEBTOR, check here are an open and an open analysis and an open and an	New York ADD collateral THIS AMENDMENT: Provide	RESTATE Only one name (9a or 9b) (name of Astor	10022 Covered collateral A	COUNTRY USA SSIGN collateral S (2)

2220947008 Page: 2 of 3

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11	LLOW INSTRUCTIONS INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amer 2200519005 filed 1/5/22	ndment form		
	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on A	mendment form		
	12a ORGANIZATION'S NAME RMF SUB 2, LLC			
OR	12b. INDIVIDUAL'S SURNAME			
		. .		
	FIRST PERSONAL ME			
	ADDITIONAL NAME(S)/INT (IAL S)	SUFFIX	HE ABOVE SPACE IS FOR FILING OFFICE	ISE ONLY
13.	Name of DEBTOR on related financing statement (Name of a current Debtor one Debtor name (13a or 13b) (use exact, full liams do not omit, modify, or abbreviat	f record required for Indexing purp	oses only in some filing offices - see instruction item	
	13a. ORGANIZATION'S NAME RIDER FAMILY PORTFOLIO LLC			1 400
OR	13b. INDIVIDUAL'S SURNAME FII	RST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
		Collin		
		County	Continue of the continue of th	
15.	This FINANCING STATEMENT AMENDMENT: ☐ covers timber to be cut ☐ covers as-extracted collateral ✓ is filed as a f	17. Description of rea	el astate:	ned on
16.	This FINANCING STATEMENT AMENDMENT:	17. Description of rea	, CO	
16.	This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as extracted collateral is filed as a filed as a filed as a filed as a filed covers and eddress of a RECORD OWNER of real estate described in item 17	17. Description of rea ixture filing covering the Exhibit "A", a	property more specifically describitached hereto and made a part livess(es): 3320 West Fullerton Av	nereof
16.	This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as extracted collateral is filed as a filed as a filed as a filed as a filed covers and eddress of a RECORD OWNER of real estate described in item 17	ixture filing covering the Exhibit "A", a	property more specifically describitached hereto and made a part livess(es): 3320 West Fullerton Av	nereof

18. MISCELLANEOUS:

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EXHIBIT A

LEGAL DESCRIPTION

PARCEL 1:

LOTS 54, 55, 56, 57, 58, AND THE WEST 6 FEET OF LOT 59 IN DE ZENG'S LOGAN SQUARE SUBDIVISION OF BLOCK 3 IN GARRETT'S SUBDIVISION OF PART OF THE EAST 1/2, OF THE SOUTH EAST 1/4 OF SECTION 26, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL 2

THE EAST 19 'EIT OF LOT 59 AND THE WEST 9 FEET OF LOT 60 IN DE ZENG'S LOGAN SQUARE SUBDIVISION OF BLOCK 3 IN GARRETT'S SUBDIVISION IN THE EAST 1/2 OF THE SOUTH EAST 1/4 0% SECTION 26, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL 3:

THE EAST SIXTEEN (16) FEET CELOT SIXTY (60) AND ALL OF LOT SIXTY ONE (61) AND THE WEST FIFTEEN (15) FEET OF LOT (1) TY TWO (62) IN DEZENG'S LOGAN SQUARE SUBDIVISION OF BLOCK 3 IN GARRLTY'S SUBDIVISION IN THE EAST HALF OF THE SOUTHEAST QUARTER OF SECTION TWE VIY SIX (26), TOWNSHIP FORTY (40) NORTH, OUNTY CORTS OFFICE RANGE THIRTEEN (13), EAST OF THE THIRT, PAINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Tax Parcel: 13-26-427-029-0000

> 13-26-427-030-0000 13-26-427-031-0000 13-26-427-032-0000 13-26-427-033-0000 13-26-427-034-0000

Reference No.: 4491.011

Matter Name: Walgreens - Chicago

Pool: BBCMS 2022-C14