# **UNOFFICIAL COPY**

Doc#. 2224318184 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

Date: 08/31/2022 11:23 AM Pg: 1 of 3

#### UCC FINANCING STATEMENT AMENDMENT

| FOL  | LOW INSTRUCTIONS   | ı                        |   |   |                          |  |
|------|--|--------------------------|---|---|--------------------------|--|
|      | NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294   |                          | 7   |   |                          |  |
|      | E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com   |                          | _   |   |                          |  |
| C.   | SEND ACKNOWLEDGMENT TO: (Name and Address)   |                          |   |   |                          |  |
|      | 2385 88511<br>CSC  | $\neg$                   |   |   |                          |  |
|      | 801 Adlai Stevenson Drive  |                          |   |   |                          |  |
| Ι,   | Filed  | In: Illinois<br>(Cook) I |   |   |                          |  |
| L    | _  | (GOOK)                   | THE ABOVE SPA                                       | CE IS FOR FILING OFFICE US  | F ONLY                   |  |
|      | INITIAL FINANCING STATEMENT (1) 2 NUMBER (20503040 11/01/2007  |                          | 1b. This FINANCING STATEM (or recorded) in the REAL | MENT AMENDMENT is to be filed [1<br>ESTATE RECORDS                                | or record]               |  |
| 2. [ | TERMINATION: Effectiveness of the Fine icin' Statement identified above  | is terminated v          |   | endum (Form UCC3Ad) <u>and p</u> rovide De<br>I(s) of Secured Party authorizing t |                          |  |
| 3. [ | ASSIGNMENT (full or partial): Provide name of Assignae in item 7a or 7b,   |                          |   | f Assignor in item 9  |                          |  |
|      | For partial assignment, complete items 7 and 9 and a so i dir ate affected co  | llateral in item         | 8   |   |                          |  |
| 4.   | CONTINUATION: Effectiveness of the Financing Statement 'Jent, "ed abo continued for the additional period provided by applicable law | ve with respect          | t to the security interest(s) of Secu               | ared Party authorizing this Continua  | ation Statement is       |  |
| 5.   | PARTY INFORMATION CHANGE:  |                          |   |   |                          |  |
| C    | theck <u>one</u> of these two boxes:  AND Check one  |                          |   | e: Complete itemDELETE nam  | e: Give record name      |  |
|      | his Change affects Debtor or Secured Party of record item 6a   | ( r 6b; and item         | 7a or 7b <u>and</u> item 7c 7a or 7b,               |   | n item 6a or 6b          |  |
| 6. ( | CURRENT RECORD INFORMATION: Complete for Party Information Change  6a. ORGANIZATION'S NAMECHAVEZ SARA                                | a - pri vide only        | one name (6a or 6b)                                 |   |                          |  |
| OR   | 6b. INDIVIDUAL'S SURNAME   | FIRST OFFISA             | 4   | LADDITIONAL MANECOVINITIAL (O)  | OUEEN                    |  |
|      | OD. INDIVIDUAL'S SURNAME   | FIRST PERSON             | NAL VAM :   | ADDITIONAL NAME(S)/INITIAL(S)   | SUFFIX                   |  |
| 7. ( | CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information   |                          |   |   | rt of the Debtor's name) |  |
|      | 7a. ORGANIZATION'S NAME Community Loan Servicing, LLC  | , f/k/a Bay              | view Loan Servicing, I                              | _LC   |                          |  |
| OR   | 7b. INDIVIDUAL'S SURNAME   |                          | <u> </u>  | •   |                          |  |
|      | 7D. INDIVIDUAL 5 SURINAME  |                          |   |   |                          |  |
|      | INDIVIDUAL'S FIRST PERSONAL NAME   |                          |   | 10  |                          |  |
|      |  |                          |   |   |                          |  |
|      | INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)   |                          |   | 175   | SUFFIX                   |  |
| 7c.  |  | CITY<br>Coral Gat        | oles  | STATE POSTAL COLE FL 33146  | COUNTRY                  |  |
| 8.   | COLLATERAL CHANGE: Also check one of these four boxes: ADD   | collateral               | DELETE collateral                                   | ESTATE covered collateral   | ASSIGN collateral        |  |
| U. L | Indicate collateral:   | Collateral               |   | ESTATE COVERED CONSIDERAL   | J AGGIGIT CONSTENS       |  |
|      |  |                          |   |   |                          |  |
|      |  |                          |   |   |                          |  |
|      |  |                          |   |   |                          |  |
|      |  |                          |   |   |                          |  |
|      |  |                          |   |   |                          |  |
|      |  |                          |   |   |                          |  |
|      | NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM  |                          |   | ame of Assignor, if this is an Assign   | ment)                    |  |
| l)   | this is an Amendment authorized by a DEBTOR, check here  | ame of authorizing       | ng Debtor   |   |                          |  |
|      | DAT VIEW LOAN SERVICING, L   | LO                       |   |   |                          |  |
| OR   | 9b. INDIVIDUAL'S SURNAME   | FIRST PERSON             | NAL NAME  | ADDITIONAL NAME(S)/INITIAL(S)   | SUFFIX                   |  |
| 10.  | <br>OPTIONAL FILER REFERENCE DATA:Debtor:CHAVEZ SARA   |                          |   |   | 2385 88511               |  |

# **UNOFFICIAL COPY**

### **UCC FINANCING STATEMENT AMENDMENT ADDENDUM**

| FOLLOW INSTRUCTIONS  |                               |   |                   |
|--|-------------------------------|---|-------------------|
| 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Ai 0730503040 11/01/2007   |                               |   |                   |
| 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 or  | n Amendment form              |   |                   |
| 12a. ORGANIZATION'S NAME<br>BAYVIEW LOAN SERVICING, LLC  |                               |   |                   |
|  |                               |   |                   |
| OR 12b. INDIVIDUAL'S SURNAME   |                               |   |                   |
| FIRST PERSONAL N' N'E  |                               |   |                   |
| ADDITIONAL NAME(S)/INIT. ALC)  | SUFFIX                        | THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY |                   |
| 13. Name of DEBTOR on related financing stalement (Name of a current Debt<br>one Debtor name (13a or 13b) (use exact, full nam.; do not omit, modify, or abbre |                               |   | 13): Provide only |
| 13a. ORGANIZATION'S NAME   | wate any part of the Deptor's | name), see insudutons ii name does not iit.   |                   |
| OR 13b. INDIVIDUAL'S SURNAME CHAVEZ  | FIRST PERSONAL NAME<br>SARA   | ADDITIONAL NAME(S)/INITIAL(S)                 | SUFFIX            |
| 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): debtor CHAVEZ SARA secure party BAYVIEW LOAN SERVICING, LLC  | + Colyna                      | Clory's Office                                |                   |
| Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):  |                               | on of real estate:<br>Iched<br>01-125-018     |                   |
| 18. MISCELLANEOUS;   |                               |   |                   |

## **UNOFFICIAL COPY**

### LEGAL DESCRIPTION:

Lot 18 in Block 9 in Scoville, Walker and McElwee's Subdivision in the West ½ of the Northwest ¼ of Section 1, Township 38 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois.

PIN: 19-01-125-018

Property of Cook County Clark's Office