Doc#. 2307333492 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

Date: 03/14/2023 03:08 PM Pg: 1 of 2

## **UCC FINANCING STATEMENT AMENDMENT**

FOL	LOWINSTRUCTIONS		_					
	NAME & PHONE OF CONTACT AT FILER (optional) me: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 8	18-662-4141	]					
B. E	-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com							
C. 8	SEND ACKNOWLEDGMENT TO: (Name and Address) 38881 - NBT (	 Bank	1					
١	Lien Solutions 91775 P.O. Box 29071 Glendale, CA 91209-9071 LLL	606						
L	FIXTU  File with: Cook, IL	KE _	THE AB	OVE SPACE IS F	OR FILING OFFICE US	SE ONLY		
	NITIAL FINANCING STATEMENT FILE NUMBER 132006405 11/16/2021 CC III Cook	1	b. This FINANCIN (or recorded) i Filer: attach Am	NG STATEMENT AM n the REAL ESTATE endment Addendum (Fo	TENDMENT is to be filed [for ERECORDS rm UCC3Ad) <u>and</u> provide Debt	or record]		
2. 🛭	TERMINATION: Effectiveness of the Financing ನೇatement identified above is Statement							
3.	ASSIGNMENT (full or partial): Provide name or Assigner in item 7a or 7b, <u>ar</u> For partial assignment, complete items 7 and 9 <u>and</u> a so in directed co		signee in item 7c <u>and</u>	name of Assignor in	item 9			
4.	CONTINUATION: Effectiveness of the Financing Statement ider into above continued for the additional period provided by applicable law	with respect to th	e security interest(s)	of Secured Party aut	horizing this Continuation ६	Statement is		
_	neck one of these two boxes.	thrise three boxe						
Т	nis Change affects Debtor or Secured Party of record CHANG	Lisane and/or ad o 6b; <u>and item 7</u> a	dress: Complete or 7b <u>and</u> item 7c	ADD name: Compli 7a or 7b, <u>and</u> item :		Give record name item 6a or 6b		
6. Cl	JRRENT RECORD INFORMATION: Complete for Party Information Change -	provide only <u>one</u>	name (6a or 6b)					
OD	6a. ORGANIZATION'S NAME Fenko	0						
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NP.WE	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (ra or 7b) (us which, full name; do not omit modify, or abbreviate any part of the Debtor's  7a. ORGANIZATION'S NAME  OR  7b. INDIVIDUAL'S SURNAME								
	INDIVIDUAL'S FIRST PERSONAL NAME							
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				175.	SUFFIX		
7c. f	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY		
8. [	COLLATERAL CHANGE: Also check one of these four boxes: ADD	collateral	DELETE collateral	RESTATE	covered collateral	ASSIGN collateral		
Equince Inst rela disp any	Indicate collateral: Solar Equipment; all attachments, accessories, tools, batteries, p ipment; all claims of any type or nature, including warranty claim intives that are payable as a result of installing the Solar Equipm aller; all your rights, title, interests, and remedies under all agree ting to the Collateral (including, without limitation, the Installment iosition of any property that constitutes Collateral, including any Collateral and any other payment received as a result of posses proceeds of and all accessions to, substitutions and replacement	ns related to the thent except for the ments, books, the Agreement), payment receissing all or any	e Solar Equipmer such rebates and records, statemer all consideration ved from any insur portion of the Co	nt or the Installati d incentives whice ents and docume received from the urer arising from ollateral all suppo	ion Agreement; all reb h have been assigned ntation and other gene e operation, collection any loss, damage or c arting obligations; and	ates and I to your eral intangibles , sale or other lestruction of all products		
	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME this is an Amendment authorized by a DEBTOR, check here and provide n 9a. ORGANIZATION'S NAME	NDMENT: Provame of authorizing	· —	a or 9b) (name of As	signor, if this is an Assignm	ent)		
	NBT Bank, NA							
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
10. C	OPTIONAL FILER REFERENCE DATA: Debtor Name: Fenko	<u> </u>		I				
917	75606 269 SPECIALTY LENDING							
_						5.0.5.0074		

## **UNOFFICIAL COPY**

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM

11. IMPTOR PARACHEC STATEMENT THE NUMBER? Sizes as item to confined rest form  E2. 1/2 (2006) 11. INFO (2002) CO IL Cook  12. 1/4 (2007) FORTY AUTHOROUGH THE AUBICOMENT Serve as item 0 on Ameridanen form  E3. Inter SERVENT AUTHOROUGH THE AUBICOMENT Serve as item 0 on Ameridanen form  FIRST PERION. NAA  13. Inter SERVENT AUTHOROUGH THE AUBICOMENT Serve as item 0 on Ameridanen form  FIRST PERION. NAA  14. AUDITORIA SERVENT AUTHOROUGH THE AUBICOMENT Serve as item 0 on Ameridanen form  FIRST PERION. NAME  15. The FIRST PERION. NAME  FIRST PERIO		CONTINUATIONS	OW						
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Supplemental   Supp	OR	12b. INDIVIDUAL'S SURNAME							
Supplemental   Supp		FIRST PERSONAL NAM F							
THE ABOVE SPACE IS FOR FILLING OFFICE USE ONLY  19. Name of DEBTOR on related financing stations (Chame of a current Debtor of record required for industry part of the Debtor is name); see instruction lism 13; Provide only one Debtor name (13a or 13e) (use exact. full regis) do not one, modify, or abbreviete any part of the Debtor is name); see instruction lism 13; Provide only one of the Debtor is name). The Debtor is name of the Debtor is name.  15 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  16 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  16 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  17 Debtor open of the Debtor of the SWINTIAL (8)  18 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  19 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  19 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  10 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  11 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  12 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  13 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  14 ADDITIONAL NAMES (CHARLES)  15 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  15 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  16 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  16 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  17 Debtor open of the Debtor of the Swintial (8)  18 This EPINANCING STATEMENT (AMEN) SWINTIAL (8)  19 This EPINANCING STATEM									
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14 ADDITIONAL SPACE FOR ITEM 9 (Collateral):   Debtor Name and Address:   Fenko - 2507 N Sacramento Ave , Chicago, IL 60647   Secured Party Name and Address:   NBT Bank, NA - 52 South Brand St , Norwich, NY 13815   Insurance, indemnity, warranty or guaranty payable to you from time to time with respect to any of the foregoing.    15. This FINANCING STATEMENT AMENDMENT:	OR		NAL NAME	ADDITIONAL NAME(SVINITIAL(S)	SUFFIX				
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