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Karen A. Yarbrough Cook County Clerk

Date: 06/06/2023 12:55 PM Pg: 1 of 2

UCC FINANCING STATEMENT AMENDMENT

| FOL | LLOW INSTRUCTIONS | | | | |
|-------------------------|---|--|--|---|---------------------------------|
| | 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) | | | | |
| | 2572 07716 CSC | コ | | | |
| | 801 Adlai Stevenson Drive Springfield, IL 62703 | Filed In: Illinois | | | |
| | | (Cook) | THE ABOVE SPACE | CE IS FOR FILING OFFICE USE O | ONLY |
| | INITIAL FINANCING STATEMENT FILE NUMBER | | 1b. This FINANCING STATEM (or recorded) in the REAL | IENT AMENDMENT is to be filed (for r ESTATE RECORDS | record] |
| | ▼ TERMINATION: Effectiveness of the Fine icin: Statement identifie | d above is terminated | | endum (Form UCC3Ad) <u>and</u> provide Debtor t(s) of Secured Party authorizing this | |
| 3. [| ASSIGNMENT (full or partial): Provide name of Assignme in item 7 For partial assignment, complete items 7 and 9 and a so indirecte affe | | | f Assignor in item 9 | |
| 4. | CONTINUATION: Effectiveness of the Financing Statement Jent continued for the additional period provided by applicable law | | | red Party authorizing this Continuatio | n Statement is |
| 5. | | 9 | | | |
| | Lifeck one of these two boxes. | eck one of inese three b CHANGE name and/or | address: CompleteADD nam | e: Complete item DELETE name: 0 | Give record name |
| | This Change affects Debtor or Secured Party of record CURRENT RECORD INFORMATION: Complete for Party Information | item 6a () 6b; and item | | and item 7c to be deleted in it | em 6a or 6b |
| U. (| 6a. ORGANIZATION'S NAME | in Griange - pic vide Grily | <u>Me</u> name (oa oi ob) | | |
| OR | 6b. INDIVIDUAL'S SURNAME BARRON | FIRST PERSON | | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | | | # 5 11 1 |
| | | | only one name (7a or 7°, tus), exact, full hai | me; do not omit, modify, or abbreviate any pari of | ine Debior's name) |
| 7. (| CHANGED OR ADDED INFORMATION: Complete for Assignment or Party 7a. ORGANIZATION'S NAME | Information Change - provide | <u> </u> | | |
| OR | | Imormation Change - provide | C | , | |
| | 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME | Information Change - provide | 6/2 | -, | |
| | 7a. ORGANIZATION'S NAME | Information Change - provide | - C/O/A | Ś | |
| | 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME | Imormation Change - provide | - C/O/14 | <u>S</u> O _{/Sc} . | SUFFIX |
| OR | 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME | CITY | 74 | STATE POSTAL COLE | |
| OR | 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS | СІТУ | 7 | STATE POSTAL COLE | SUFFIX |
| 7c. | 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: | | 7 | STATE POSTAL COLE | SUFFIX |
| 7c. | 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: | СІТУ | 7 | STATE POSTAL COLE | SUFFIX |
| 7c. 8. [| 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: | СІТУ | 7 | STATE POSTAL COLE | SUFFIX |
| 7c. 8. [| 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: 18 CARRIER CNPHP3617ALA 2.5 | СІТУ | 7 | STATE POSTAL COLE | SUFFIX |
| 7c. 8. [| 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: 18 CARRIER CNPHP3617ALA 2.5 | СІТУ | 7 | STATE POSTAL COLE | SUFFIX |
| 7c. 8. [20 20 | 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: 018 CARRIER CNPHP3617ALA 2.5 018 CARRIER 24ABB330ABN3 2.5 | CITY ADD ∞llateral | DELETE collateral R | STATE POSTAL COLE ESTATE covered collateral | SUFFIX COUNTRY SSIGN collateral |
| 7c. 8. [20 20 | 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: 018 CARRIER CNPHP3617ALA 2.5 018 CARRIER 24ABB330ABN3 2.5 | CITY ADD ∞llateral | DELETE collateral R | STATE POSTAL COLE ESTATE covered collateral | SUFFIX COUNTRY SSIGN collateral |
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UCC FINANCING STATEMENT AMENDMENT ADDENDUM

| FOLLOW INSTRUCTIONS | | | |
|--|---|--|---------------------------------|
| 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same a 1817819079 06/27/2018 | s item 1a on Amendment form | | |
| 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Sa | me as item 9 on Amendment form | 1 | |
| 12a. ORGANIZATION'S NAME Microf | ine as non-901 Amendment to in | | |
| OR 12b. INDIVIDUAL'S SURNAME | | | |
| FIRST PERSONAL N IN'E | | | |
| ADDITIONAL NAME(SYINIT ALI') | SUFFIX | THE ABOVE SPACE IS FOR FILING OFFICE | USE ONLY |
| Name of DEBTOR on related financing state. nent (Name of one Debtor name (13a or 13b) (use exact, full name; do not omit, m 13a. ORGANIZATION'S NAME | | | 13): Provide only |
| O _× | | | T |
| 13b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME HARRIET | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 15. This FINANCING STATEMENT AMENDMENT: | HARRIE I | | |
| covers timber to be cut covers as-extracted collateral 16. Name and address of a RECORD OWNER of real estate described (if Debtor does not have a record interest): 1442 SUNSET AVE CHICAGO HEIGHTS ILLINOIS 60411 | in item 17 OF LO' SUBDI' AND O SOUTE RANGE MERID | IN GARCÍA S RESUBDIVISION OF TI T 18 IN THE HILL TOP COMPANY S VISION OF THE NORTH IF THE SO IF THE WEST ACRES OF THE NORT EAST IF SECTION 19, TOWNSHIP 3 E 14 EAST OF THE THIRD PRINCIPA PIAN, IN COOK COUNTY, ILLINOIS. 304-025-000 | UTHWEST H IF THE 5 NORTH, |
| 18. MISCELLANEOUS: RTO-000069873 | • | | |