

UNOFFICIAL COPY



2325015001

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS

Doc# 2325015001 Fee \$88.00

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) JOHN PHELPS 815-987-8675
B. E-MAIL CONTACT AT SUBMITTER (optional) JESSICCA@RLDC.US
C. SEND ACKNOWLEDGMENT TO: (Name and Address) ROCKFORD LOCAL DEVELOPEMENT CORP 120 W STATE STREET, SUITE 306 ROCKFORD, IL 61101

RHSP FEE:\$18.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 09/07/2023 09:34 AM PG: 1 OF 3

SEE BELOW FOR SECURED PARTY CONTACT INFORMATION

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
2325015000

1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Filers: attach Amendment Addendum (Form LICC34d) and provide Debtor's name in item 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party(y)ies) authorizing this Termination Statement

3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b and address of Assignee in item 7c and name of Assignor in item 9. For partial assignment, complete items 7 and 9; check ASSIGN Collateral box in item 8 and describe the affected collateral in item 8

4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. PARTY INFORMATION CHANGE:
Check one of these two boxes: Debtor or Secured Party of record
AND Check one of these three boxes to:
 CHANGE name and/or address: Complete item 6a or 6b and item 7a or 7b and item 7c
 ADD name: Complete item 7a or 7b, and item 7c
 DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME ROCKFORD LOCAL DEVELOPEMENT CORPORATION				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME U.S. SMALL BUSINESS ADMINISTRATION				
OR	7b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7c. MAILING ADDRESS

120 W STATE STREET, SUITE 306	CITY ROCKFORD	STATE IL	POSTAL CODE 61101	COUNTRY USA
-------------------------------	------------------	-------------	----------------------	----------------

8. COLLATERAL CHANGE: Check only one box:
 ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral
Indicate collateral: *Check ASSIGN COLLATERAL only if the assignee's power to amend the record is limited to certain collaterals and describe the collateral in Section 8

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment). If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME ROCKFORD LOCAL DEVELOPEMENT CORPORATION				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA:
50834191-08 GS TRUCK CENTER, INC. (DEBTOR)

23005318LFE
NIM 202

UNOFFICIAL COPY**UCC FINANCING STATEMENT AMENDMENT ADDENDUM**
FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form

2325015000

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as Item 9 on Amendment form

12a. ORGANIZATION'S NAME

GS TRUCK CENTER, INC.

OR
12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction Item 13): Provide only one Debtor name (13a or 13b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name), see Instructions if name does not fit

13a. ORGANIZATION'S NAME

GS TRUCK CENTER, INC.

OR
13b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

14. ADDITIONAL SPACE FOR (CHECK ONE BOX): ITEM 8 (Collateral) OR OTHER INFORMATION (Please Describe)

15. This FINANCING STATEMENT AMENDMENT:

 covers timber to be cut covers as-extracted collateral is filed as a fixture filing16. Name and address of a RECORD OWNER of real estate described in item 17
(if Debtor does not have a record interest):GS TRUCK CENTER, INC.
19660 STONEY ISLAND AVENUE
LYNWOOD, IL 60411

17. Description of real estate:

THE SOUTH 8 ACRES OF THE NORTH 16
ACRES OF THE SOUTHEAST 1/4 OF THE
NORTHEAST 1/4 OF SECTION 11,
TOWNSHIP 35 NORTH, RANGE 14, EAST
OF THE THIRD PRINCIPAL MERIDIAN,
EXCEPT THEREFROM THE EAST 50.00
FEET DEDICATED FOR HIGHWAY,
(EXCEPT THE WEST 275.00 FEET TAKEN
FOR CALUMET EXPRESSWAY), IN COOK
COUNTY, ILLINOIS.

18. MISCELLANEOUS:

UNOFFICIAL COPY

SCHEDULE TO UCC-1

19660 STONEY ISLAND AVENUE

LYNWOOD, IL 60411

THE SOUTH 8 ACRES OF THE NORTH 16 ACRES OF THE SOUTHEAST 1/4 OF THE NORTHEAST 1/4 OF SECTION 13, TOWNSHIP 35 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, EXCEPT THEREFROM THE EAST 50.00 FEET DEDICATED FOR HIGHWAY, (EXCEPT THE WEST 275.00 FEET TAKEN FOR CALUMET EXPRESSWAY), IN COOK COUNTY, ILLINOIS.

PIN: 32-4-203-004-0000

Property of Cook County Clerk's Office