Doc#. 2328633446 Fee: \$107.00

Karen A. Yarbrough Cook County Clerk

Date: 10/13/2023 03:25 PM Pg: 1 of 3

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3	282 Fax: 818-662-4141	1		
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com		Ì		
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 238	314 - WELLS FARGO	1		
Lien Solutions P.O. Box 29071	95503676			
Glendale, CA 91209-9071	ILIL			
File with: Cook, IL	FIXTURE	THE ABOVE SPA	CE IS FOR FILING OFFICE US	E ONLY
1a. INITIAL FINANCING STATEMENT F"LF YUMBER 1931245110 11/8/2019 CC /L C Jok		(or recorded) in the REAL	MENT AMENDMENT is to be filed [fo ESTATE RECORDS endum (Form UCC3Ad) <u>and</u> provide Debto	
TERMINATION: Effectiveness of the Financing Statement identification. 2. X TERMINATION: Effectiveness of the Financing Statement. 2. X TERMINATION: Effectiveness of the Financing Statement. 2. X TERMINATION: Effectiveness of the Financing Statement.	tified above is terminated with			
ASSIGNMENT (full or partial): Provide name or Assigner in iter For partial assignment, complete items 7 and 9 and a so ir direction.		signee in item 7c <u>and</u> name of As	ssignor in item 9	
CONTINUATION: Effectiveness of the Financing Statement ide continued for the additional period provided by applicable law	rimea above with respect to th	ne security interest(s) of Secured	Party authorizing this Continuation S	statement is
5. PARTY INFORMATION CHANGE:				
Check one of these two boxes: This Change affects Debtor or Secured Party of record	D Check <u>(ne</u> c) th∕se three boxe CHANC _ iaine and/or ac item 6a oi 6b; <u>an</u> d item 7a		e: Complete item DELETE name: and item 7c to be deleted in	Give record name
6. CURRENT RECORD INFORMATION: Complete for Party Informati			ion to be delected in	ion of or
68. ORGANIZATION'S NAME BRI 1864 230 W MONROE LLC	0			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L WANE	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Park	Vinformation Change - provide only o	ne name va or 7h) (us and full name:	da nat omit, madifu, ar abbreviste any nart of th	a Debtorio pama)
7a. ORGANIZATION'S NAME	y minimation change - provide only <u>o</u>	name (7a or 7b) (or e d., for name,	uo not unii. Induny, ur addrewate any part or un	e Deptor's name,
OR 75. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME			0,	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			- O/Sc.	SUFFIX
7c. MAILING ADDRESS	СІТҮ		STATE POSTAL LOD.	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four box	es: ADD collateral	DELETE collateral	ESTATE covered collateral	ASSIGN collateral
Indicate collateral: LOAN # 001956457				
SEE EXHIBIT A LEGAL DESCRIPTION ATTACHED HE	RETO AND INCORPOR	ATED HEREIN BY THIS R	EFERENCE.	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here	G THIS AMENDMENT: Pro and provide name of authorizin		ame of Assignor, if this is an Assignme	ent)
9a. ORGANIZATION'S NAME	·	<u>-</u>		
MORGAN STANLEY MORTGAGE CAPITAL I	HOLDINGS, AS ADMI FIRST PERSONA		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor Name: BRI 195503676 001956457	1864 230 W MONROE L	LC		
#BBUSELED 001956457				

UNOFFICIAL COPY

	INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amen 31245110 11/8/2019 CC IL Cook	dment form		
12.	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on A	mendment form		
	12a. ORGANIZATION'S NAME MORGAN STANLEY MORTGAGE CAPITAL HOLDING	GS, AS		
	ADMINISTRATIVE AGENT			
R	12b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAY (5			
	ADDITIONAL NAME(SYINITIAL(S)	SUFFIX	IF ABOVE CRACE IS FOR FILING OFFICE III	CE ONLY
3.	Name of DEBTOR on related financing state inent (Name of a current Debtor of	of record required for indexing purpose	HE ABOVE SPACE IS FOR FILING OFFICE US s only in some filing offices - see Instruction iter	
	one Debtor name (13a or 13b) (use exact, full name do not omit, modify, or a	bbreviate any part of the Debtor's nam	ne); see Instructions if name does not fit	
	13a. ORGANIZATION'S NAME BRI 1864 230 W MONROE LLC			
?	13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	ADDITIONAL SPACE FOR ITEM 8 (Collateral): btor Name and Address: I 1864 230 W MONROE LLC - 100 N FEDERAL HWY, SUITE 4	C5 , HALLANDALE, FL 33009		
el C	btor Name and Address:	'	Continue of the continue of th	

001956457

MORGAN STANLEY MORTGAGE

18. MISCELLANEOUS; 95503676-IL-31 23814 - WELLS FARGO CMS EAST

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EXHIBIT A

LEGAL DESCRIPTION

ALL OF LOT 7 AND ALL OF LOT 8 (EXCEPT THE WEST 40.00 FEET THEREOF TAKEN FOR WIDENING OF FRANKLIN STREET) IN BLOCK 94 IN SCHOOL SECTION ADDITION TO CHICAGO IN SECTION 16, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, (EXCEPTING FROM SAID PREMISES THE NORTH 9.00 FEET THEREOF TAKEN FOR ALLEY), IN COOK COUNTY, ILLINOIS.

COMMON ADDRESS: 230 West Monroe Street, Chicago, Illinois 60606 ad 17-16.

Of County Clarks Office

PIN: 17-16-202-013-0000 and 17-16-202-014-0000