

Doc#. 2405746048 Fee: \$107.00

Karen A. Yarbrough Cook County Clerk

Date: 02/26/2024 02:53 PM Pg: 1 of 2

## **UCC FINANCING STATEMENT AMENDMENT**

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) SUE SKINNER 312-360-3309							
B. E-MAIL CONTACT AT SUBMITTER (optional) SSKINNER@SOMERCOR.COM							
C. SEND ACKNOWLEDGMENT TO: (Name and Address)							
SOMERCOR 504, INC. 209 S. LASALLE ST. #203		1					
CHICAGO, IL 60604		.					
		l <b> </b>					
SEE BELOW FOR SECURED PARTY CONTACT INFO	DRMATION	THE ABOVE	SPACE IS FOR	R FILING OFFICE USE (	ONLY		
		(or recorded) in the Ri	This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS, Filer: atlach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in Item 13.				
2. TERMINATION: Effectiveness of the Financing Striement identified at	pove is terminated with r	espect to the security interest(s)	of Secured Part(y)	(ies) authorizing this Termina	tion Statement		
3. ASSIGNMENT: Provide name of Assignee in item 7a or 75, and address For partial assignment, complete Items 7 and 9; check AS: IGN Collectors							
4. CONTINUATION: Effectiveness of the Financing Statement identified additional period provided by applicable law	a love with respect to the	e security interest(s) of Secured	Party authorizing t	his Continuation Statement	s continued for the		
5. PARTY INFORMATION CHANGE:							
Check one of these two doxes:	theck one of these three		D name: Comolel	e item pDELETE name:	Give record name		
This Change affects Debtor or Secured Party of record  6. CURRENT RECORD INFORMATION: Complete for Party Information	ilem 6a cr 6b; ar 🚉 🤙	m 7a or 7b <u>and</u> item 7c 7a	or 7b, <u>and</u> item 7c	to be deleted in	tem 6a or 6b		
6a. ORGANIZATION'S NAME	n Change - provice orlly	une name (oa or oo)			· ·		
		1/					
OR 66. INDIVIDUAL'S SURNAME	FIRST PERS	ONAL 'AM' I	ADDITION	IAL NAME(S)/INITIAL(S)	SUFFIX		
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party I	Information Change - provide o	only one name (/a or 7b) (ur., exart, full	name; do not omit, mo	lify, or abbreviate any part of the De	ebtor's name)		
7a. ORGANIZATION'S NAME		()					
OR THE SUPPLIES OF SUPPLIES			)				
7b. INDIVIDUAL'S SURNAME			74,				
INDIVIDUAL'S FIRST PERSONAL NAME							
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INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		•			SUFFIX		
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7c. MAILING ADDRESS	CITY		STATE	POSTAL COUF	COUNTRY		
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY		
7c. MAILING ADDRESS  8. COLLATERAL CHANGE: Check only one box:	CITY  ADD collateral	DELETE collateral			COUNTRY  ASSIGN* collateral		
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8. COLLATERAL CHANGE: <u>Check only one</u> box: Indicate collateral:	ADD collateral *Check ASSIGN COLLATER	AL only if the assignee's power to amend	RESTATE or	overed collateral contains collateral and describe the	ASSIGN* collateral		
8. COLLATERAL CHANGE: Check only one box: Indicate collateral:  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING To this is an Amendment authorized by a DEBTOR, check here and process.	ADD collateral *Check ASSIGN COLLATER	AL only if the assignee's power to amend	RESTATE or	overed collateral contains collateral and describe the	ASSIGN* collateral		
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2405746048 Page: 2 of 2

## **UNOFFICIAL COPY**

## **UCC FINANCING STATEMENT AMENDMENT ADDENDUM**

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form  12a. ORGANIZATION'S NAME  US SMALL BUSINESS ADMINISTRATION  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 state item! (Name of a current Debtor of record required for indexing purposes only in some filling offices - see instruction Item 13): Provide only one Debtor name (13a or 13b) (use exact, full name to or of omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit  13a. ORGANIZATION'S NAME  SVT MASTERS CORPORATION  13b. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  ADDITIONAL NAME(S)/INITIAL(S)  SUFFIX	FOLLOW INSTRUCTIONS				
The FRANCING STATEMENT AMENDMENT   The ABOVE SPACE IS FOR FILING OFFICE USE ONLY   The ABOVE SPACE IS FOR FILING OFFI	11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 0921534050 FILED 8/3/09 COOK COUNTY				
US SMALL BUSINESS ADMINISTRATION    134. INBINISTRATION   135. INBINISTRATION   135. INBINISTRATION   135. INBINISTRATION   135. INBINISTRATION   135. INBINISTRATION   136. INB	12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form				
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