

10/12/2016 07:54:53 AM FILED/CERT

UCC FINANCING STATEMENT AMENDMENT

COLLOW INCTDUCTIONS

FULLUW INSTRUCTIONS		
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294		
B. E-MAIL CONTACT AT FILER (optional)		
SPRFiling@cscinfo.com		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		
1218 96243		
Corporation Service Company		
801 Adlai Stevenson Drive		
Springfield, IL 62703	hama	
	helby) THE ABOVE SPACE IS FOR FILING OFFICE LISE OF	MI V
1a. INITIAL FINANCING STATEMENT FILE NUMBER	THE ABOVE SPACE IS FOR FILING OFFICE USE OF	
20080808000320380 08/08/2008	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for re (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's	
2. TERMINATION: Effectiveness of the Financing Statement identified above is terestated above in the Statement	rminated with respect to the security interest(s) of Secured Party authorizing this To	ermination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and a For partial assignment, complete items 7 and 9 and also indicate affected collaters.		
4. CONTINUATION: Effectiveness of the Financing Statement identified above with continued for the additional period provided by applicable law	ith respect to the security interest(s) of Secured Party authorizing this Continuation	Statement is
5. PARTY INFORMATION CHANGE:		•
Check <u>one</u> of these two boxes:		
This Change affects Debtor or Secured Party of record item 6a or 6b;	me and/or address: Complete ——ADD name: Complete item ——DELETE name: Given and item 7s or 7b and item 7c ——to be deleted in item	
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - pro		
6a. ORGANIZATION'S NAMEPELTOWN REALTY LLP		
OR 6b. INDIVIDUAL'S SURNAME	T PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change	nas - provide only one name (7e or 7h) (une exact full name; do not emit, modify, or abbreviate any next of th	o Dobtoro somo)
7a. ORGANIZATION'S NAME	ige - provide only one harne (78 or 70) (use exact, full harne, do not offit, modify, or appreviate any part of the	e Deotor's name)
OR 7b. INDIVIDUAL'S SURNAME	——————————————————————————————————————	· · · · · · · · · · · · · · · · · · ·
7 D. HADIAIDONE & SOMMAINE		
		<u> </u>
INDIVIDUAL'S FIRST PERSONAL NAME		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	——————————————————————————————————————	SUFFIX
7c. MAILING ADDRESS CITY	STATE POSTAL CODE	COUNTRY
8 COLLATERAL CHANGE: Also check one of these four boxes: ADD collate	teral DELETE collateral RESTATE covered collateral ASS	SIGN collateral
SEE ORIGINAL FILING FOR DETAILS.		
	Filed and Recorded Official Public Records	
	Judge James W. Fuhrmeister, Probate Judge, County Clerk	
$\widetilde{\mathcal{J}}_{AB}$	S.00 CHERRY 20161012000373600	

	IAME OF SECURED PARTY OF RECORD AU this is an Amendment authorized by a DEBTOR, check	THORIZING THIS AMENDMENT: Provide only <u>one</u> name (here and provide name of authorizing Debtor	(9a or 9b) (name of Assignor, if this is an Assignme	nt)	
	9a. ORGANIZATION'S NAME First Commercial a div Synovus Bank				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	

10. OPTIONAL FILER REFERENCE DATA: Debtor: VULCAN THREADED PRODUCTS INC - WR# 1144968

1218 96243