

2023-12965
 06-11-2023 02:12 AM
TOTAL FEES: 25.00
 BY: JAS
 PG #: 3
RECORDED AS PRESENTED

STATE OF INDIANA
 HANK COUNTY
FILED FOR RECORD
 GINA PIMENTEL
 RECORDER

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294	
B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 5px; width: 80%;"> 2643 46688 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 </div> <div style="text-align: right; width: 15%;"> Filed In: Indiana (Lake) </div> </div>	

SEE BELOW FOR SECURED PARTY CONTACT INFORMATION
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER: **2022-544625 11/03/2022**

 1b. THIS FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Filer, attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13.

2. **TERMINATION:** Effectiveness of this Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party(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: AND, Check one of these three boxes to:

This Change affects Debtor or Secured Party of record

 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 9a or 9b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (9a or 9b)

9a. ORGANIZATION'S NAME			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
GUZMAN	IRENE		

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			
OR 7b. INDIVIDUAL'S SURNAME			
INDIVIDUAL'S FIRST PERSONAL NAME			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX
7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE COUNTRY

8. **COLLATERAL CHANGE:** Check only one box: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN* collateral

Indicate collateral: **WATER TREATMENT SYSTEM** *Check ASSIGN COLLATERAL only if the assignee's power to amend the record is limited to certain collateral 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: Aqua Finance, Inc.			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. **OPTIONAL FILER REFERENCE DATA:** **AFIR003194968** 2643 46688

NOT AN OFFICIAL DOCUMENT

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as Item 1a on Amendment form 2022-544625 11/03/2022	
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as Item 9 on Amendment form	
12a. ORGANIZATION'S NAME Aqua Finance, 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			
OR			
13b. INDIVIDUAL'S SURNAME GUZMAN	FIRST PERSONAL NAME IRENE	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
14. ADDITIONAL SPACE FOR (CHECK ONE BOX): <input checked="" type="checkbox"/> ITEM 8 (Collateral) OR <input type="checkbox"/> OTHER INFORMATION (Please Describe)			

15. This FINANCING STATEMENT AMENDMENT:
 covers timber to be cut covers as-extracted collateral is filed as a fixture filing

16. Name and address of a RECORD OWNER of real estate described in Item 17
(if Debtor does not have a record interest):

IRENE GUZMAN
6726 ONTARIO AVE
HAMMOND, IN 46323-1440

17. Description of real estate:

6726 ONTARIO AVE
HAMMOND, IN 46323-1440
County LAKE COUNTY
Parcel Number 45-07-08-278-021.000-023
ATTACHED FULL LEGAL:

18. MISCELLANEOUS:

NOT AN OFFICIAL DOCUMENT

Lot 10, Block 3 Forestdale, in the City of Hammond, as shown in Plat Book 20, page 16, in the Office of the Recorder of Lake County, Indiana.

Property of Lake County Recorder