NOT AN OFFICIAL DOCUMENT

OLLOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional)									
C. Riggsby, (888) 31-ORION B. EMAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) Orion Financial Group, Inc. 2880, Exchange Blvd. # 100 Southlake TX 76092		GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED		2024-030172					
							11:28 AM 2024 Oct		Oct 17
								OR FILING OFFICE	
		a. INITIAL FINANCING STATEMENT FILE NUMBER Document # 2023-536339 IN Lake		1b. <u>With FINANCING STATEMENT AMENDMENT</u> is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) and <u>provide</u> Debtor's name in Item 13.					
☐ TERMINATION: Effectiveness of the Financing Statement identified	above is terminated with re	spect to the security interest(s	s) of Secured Party aut	orizing this Termination	Statement	-31-20			
☐ ASSIGNMENT (full or partial): Provide name of Assignee in item 7	'a or 7b and address of Assig	mee in item 7c and name of A	Assignor in item 9			HTTLE			
□ CONTINUATION: Effectiveness of the Financing Statement identifi- additional period by applicable law	ed above with respect to the	security interest(s) of Secure	d Party authorizing this	Continuation Statement	is continued	for the			
This Change affects □ Debtor or □ Secured □ CHANGE na	g of these three boxes to: ime and/or address: n oa or 6b; and item 7a	☐ ADD name: Com	nplete item 7a or 7b,	□ DELETE be deletes	name: Give r I in item 6a o				
CURRENT RECORD INFORMATION: Complete for Party Information OF COMPLETE OF COMP	on Change – provide only o	ne name (6a or 6b)							
6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	AME	ADDITIONA	L NAME(S)/INITIAL(S)	SUFFIX			
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME		0,							
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		1//		1 1	7.5				
7c. MAILING ADDRESS	сіту	9	STATE	POSTA	L CODE	SUFFIX COUNTR' USA			
COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral indicate collateral:	teral ASSIGN collateral		C	Orda		PLA			
				90	1 th 1				
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS by a DBITOR, clock here: [] and provide name of authorizing Debtor 90. ORGANIZATION'S NAME			e of assignor, if this is a	n Assignment). If this is	N. Carallia	-01			
by a DEBTOR, check here ☐ and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME LOAN FUNDER LLC, SERIES 62272, WHOS	SE ADDRESS IS,	645 MADISON AV	e of assignor, if this is a	n Assignment). If this is	N. Carallia	2			
by a DEBTOR, check here ☐ and provide name of authorizing Debtor. 9a. ORGANIZATION'S NAME		645 MADISON AV	e of assignor, if this is a	n Assignment). If this is	Maria Like	-01			
by a DEBTOR, check here ☐ and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME LOAN FUNDER LLC, SERIES 62272, WHOS	SE ADDRESS IS,	645 MADISON AV	e of assignor, if this is a	n Assignment). If this is	RK 1002	2			

MENT AND ARTYDOCUMENT **FOLLOW INSTRUCTIONS** 19. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Ame Document # 2023-536339 IN Lake 20. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 20a. ORGANIZATION'S NAME LOAN FUNDER LLC, SERIES 62272 OR 20b INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SHEERY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 21. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21a or 21b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name) 21a. ORGANIZATION'S NAME BEACON PROPERTY PARTNERS LLC 21b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 21c. MAILING ADDRESS STATE POSTAL CODE COUNTRY ΙN 46312 3944 ALDER STREET EAST CHICAGO 22. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (22a or 22b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) 22a. ORGANIZATION'S NAME OF 22b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY 22c MAILING ADDRESS 23. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (23s or 23b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) 23a, ORGANIZATION'S NAME OR 23b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) 23c MAILING ADDRESS STATE POSTAL CODE COUNTRY USA ASSIGNOR SECURED PARTY'S NAME: Provide only one name (24a or 24b) 24. ADDITIONAL SECURED PARTY'S NAME or 24a. ORGANIZATION'S NAME OR 24b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(SVINITIAL(S) SITEEIX FIRST PERSONAL NAME STATE POSTAL CODE

25. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (25a or 25b) 25a. ORGANIZATION'S NAME OR 25b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 25c MAILING ADDRESS STATE POSTAL CODE COUNTRY USA

COUNTRY USA

24c. MAILING ADDRESS

26 MISCELLANEOUS:

NOT AN OFFICIAL DOCUMENT

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS	ADDENDU	J M				
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendm Document # 2023-536339 IN Lake						
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 1a on Ame	_					
12a. ORGANIZATION'S NAME LOAN FUNDER LLC, SERIES 62272						
OR 12b. INDIVIDUAL'S SURNAME		_				
FIRST PERSONAL NAME						
	SUFFIX					
ADDITIONAL NAME(S)/INITIALS(S)	SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
Name of DEBTOR on related financing statement (Name of a current Debtor of rec Debtor name (13e or 13b) (use exact, full name; do not omit, modify, or abbreviate 13e. ORGANIZATION'S NAME	cord required for ind any part of the Deb	exing purposes only in some fit tor's name); see Instructions if	ing offices – see Instructions item 13): Pro- name does not fit	vide only one		
REAL INVESTING LLC 13b. INDIVIDUAL'S SURNAME F	FIRST PERSONAL	NAME	ADDITIONAL NAME(SVINITIAL(S)	SUFFIX		
OX.			, , , , , , , , , , , , , , , , , , , ,			
TA, ADDITIONAL SPACE FOR ITEM 8 (Collegens):						
15. This FINANCING STATEMENT AMENDMENT:		17. Description of real estate:				
covers timber to be cut covers as-extracted collateral X is filed as	a fixture filing		operty address: 3944 ALDER STREET, EAST HICAGO, IN 46312			
Name and address of a RECORD OWNER of real estate described in item 17 (If D have a record interest):	Debtor does not		Corder			
18 MISCELLANEOUS:						

International Association of Commercial Administrators (IACA)
FILING OFFICE COPY - UCC FINANCING STATEMENT AMENDMENT ADDENDUM (FORM UCC)Ad) (REV. 0420/11)