THIS SPACE FOR USE OF FILING OFFICER

FINANCING STATEMENT - FOLLOW INSTRUCTIONS CAREFULLY This Financing Statement is presented for filing pursuant to the Uniform Commercial Code and will remain effective, with certain exceptions, for 5 years from date of filing.

A. NAME & TEL. # OF CONTACT AT FILER (optional) B. FILING OFFICE ACCT.# (optional) C. RETURN COPY TO: (Name and Mailing Address) LexisNexis Document Solutions P. O. Box 2969 Springfield, Illinois 62708 (Pa

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| | | V (of application): LESSOR/LE | | | | | | |
|---|------------------------------------|-------------------------------|---|-------------------------------------|---|--------------|----------|----------|
| 1. D | EBTOR'S EXACT FU | LL LEGAL NAME - insert | only one debtor name (1a | or 1b) | | | | · |
| OR | 1a. ENTITY'S NAME TBJ, LLC | 700 | | | | " | | <u> </u> |
| | 1b. INDIVIDUAL'S LAST NAME | | | FIRST NAME | MIDDI | MIDDLE NAME | | SUFFIX |
| 1¢. N | MAILING ADDRESS | | | CITY | STATE | COUNTRY | POSTAL | `ODE |
| 147 | 1 N. MILWAUKEE | | Ox. | CHICAGO | IL. | 60622 | | ,00E |
| 1d. S.S. OR TAX I.D.# OPTIONAL 1e. TYPE OF ENTIT ADD'NL INFO RE ENTITY DEBTOR Limited Liability Correpan | | | 1f. ENTITY'S STATE OR COUNTRY OF TY ORGANIZATION | | 19. ENTITY'S ORGANIZATIONAL I.D.#, If any | | | |
| 2. AE | DITIONAL DEBTOR | S EXACT FULL LEGAL N | AME - insert only one re | bt ir name (2a or 2b) | | | | |
| OR | 2a. ENTITY'S NAME | | | 40 | | | | |
| | 2b. INDIVIDUAL'S LAST NAME | | FIRS' NAME | MIDDL | MIDDLE NAME SUI | | | |
| 2c. MAILING ADDRESS | | | CITY | STATE | COUNTRY POSTAL CODE | | | |
| 2d. S.S. OR TAX I.D.# OPTIONAL ADD'NL INFO RE ENTITY DEBTOR | | | 2f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION | 2g. ENT | 2g. ENTITY'S ORGANIZATIONAL I.D.#, if any | | | |
| з. S E | CURED PARTY'S | ORIGINAL S/P or ITS TOTA | AL ASSIGNEE) EXACT FU | ILL LEGAL NAME - insert only one se | cyced party name (3a | or 3h) | | LI NON |
| OR | 3a. ENTITY'S NAME FIRST BANK OF | | *************************************** | | Series (day | <u>u 00)</u> | | ····- |
| On | 3b. INDIVIDUAL'S LAST NAME | | FIRST NAME | M(2))L | MIDINE S | | SUFFIX | |
| 3c. M | c. MAILING ADDRESS | | | CITY | STATE | CC JNTSY | BOSTAL O | |
| 1835 FIRST ST | | | HIGHLAND PARK | IL | CCSALAT | POSTAL CODE | | |
| 4. This FINANCING STATEMENT covers the following types or items of property All Fixtures which are located at the real property commonly kno imited to hot water heaters, cooling and heating against ment of | | | | 1 | | | 00000 | |

| 5. CHECK This FINANCING STATEMENT is signed by the Secured Party instead of the collateral already subject to a security interest in another jurisdiction when it in a population was changed to this state, or (b) in accordance with other statutory p | Debtor to perfect a security interest (a) In was brought into this state, or when the debtor's Documentary Documentary stamp rovisions [additional data may be required] |
|--|--|
| 6. REPOTRED SIGNATURE(5) | 8. Attach Addendum [if applicable] |
| LOAN # 798 PFS | 9. Check to REQUEST SEARCH CERTIFICATE(S) on Debtor(s) [ADDITIONAL FEE] (optional) |
| (4) FILING OFFICER COOK | Concentrex Incorporated, 400 S.W. 6th Avenue, Portland, Oregon, 97204 |

later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds) and all accessions thereto, and replacements thereof including all proceeds therefrom, all of which are attached and made apart of the realty described hereon.

(1) FILING OFFICER COPY — NATIONAL FINANCING STATEMENT (FORM UCC1) (TRANS) (REV. 12/18/95)

Cook Co. D.

TBJ, LLC

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LEGAL DESCRIPTION

LOT 53 IN BLOCK 4 IN PICKET'S SECOND ADDITION TO CHICAGO, IN WEST ½ OF THE NORTHEAST ¼ OF SECTION 6, TOWNSHIP 39 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

The Real Property or its address is commonly known as 1471 N. MILWAUKEE, CHICAGO, IL 60622. The Real Property tax identification number is 17-06-209-015-0000.

Property of County Clark's Office