UNOFFICIAL CO20511650 Page 1 of 2002-05-06 08:51:55 25.00 Cook County Recorder

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] John Sheahan (773) 292-6272		0020511650		
B. SEND ACKNOWLEDGEMENT TO: (Name and Address) MB Financial Bank, N.A. Loan Documentation 1200 N. Ashland Avenue Chicago, IL 60622				
	THE ABOVE	SPACE IS FO	R FILING OFFICE US	E ONLY
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1:	a or 1b) - do not abbreviate or combine names			
1a. ORGANIZATION'S NAME 1455 SOUTH MICHIGAN AVENUE ENT	ERPRISE			
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
1c. MAILING ADDRESS 1455 S. MICHIGAN AVENUE, SUITE 100	CHICAGO	STATE	POSTAL CODE 60605	USA
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGAN ZATION ORGANIZATION PARTNERSH'P	11. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any		
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only on.	d of a name (2a or 2b) - do not abbreviate or com	bine names		
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	2f. JURISDICTION OF OF GANIZATION	2g. ORGANIZATIONAL ID #, if any		
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNO 3a. ORGANIZATION'S NAME MB FINANCIAL BANK, N.A.	OR S/P) - insert only <u>one</u> secured party name '_16	3b)		
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	M.D.JLE	NAME	SUFFIX
3c. MAILING ADDRESS 475 E. 162ND STREET	SOUTH HOLLAND	STATE	IFUSTAL CODE	COUNTRY

4. This FINANCING STATEMENT covers the following collateral:

All Fixtures and personal property belonging to the Debtor/Grantor used in connection with the subject collateral property as listed below: whether any of the foregoing is owned now or acquired 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 (including insurance, general intangibles and accounts proceeds)

L COOFFE COOFFE	CONSIGNEE/CONSIGNOR BAILEE/BAILOR	SELLER/BUYER AG. LIEN	NON-UCC FILING
5. ALTERNATIVE DESIGNATION [if applicable] LESSEE/LESSOR 6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in ESTATE RECORDS. Attach Addendum.	CONSIGNATION	PORT(S) on Debtor(s) All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA	DUA 333 L	7	

Harland Financial Solutions 400 S.W. 6th Avenue, Portland, Oregon 97204

UNOFFICIAL COPY

Property of Cook County Clerk's Office

UNOFFICIAL COPY

UCC FINANCING STATE						
9. NAME OF FIRST DEBTOR (1a or 1		TEMENT	- {			
9a. ORGANIZATION'S NAME	GAN AVENUE ENTE					
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SL	IFFIX			
10. MISCELLANEOUS:	*****	•				
No.	O CAN		THE ABOVE	E SPACE	IS FOR FILING O	FFICE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT	FULL LE JA! NAME - insert only one	debtor name (11a or 11b) -	do not abbreviate or comb	ine names		
11a. ORGANIZATION'S NAME	0.5					
OR 11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS	0	CITY		STATE	POSTAL CODE	COUNTRY
11d. TAX ID #: SSN OR EIN ADD'L INFO ORGANIZAT DEBTOR	RE 11e. TYPE OF ORGANIZATION ION	1 f. JURISDICTION OF	ORGANIZATION	11g. OR	GANIZATIONAL ID#,	if any
12. ADDITIONAL SECURED PAR	RTY'S or ASSIGNOR S/P'S NA	AME - insert only ne nam	e (12a or 12b)			
12a, ORGANIZATION'S NAME		4/)			
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS		CITY	C/2	STATE	POSTAL CODE	COUNTRY
This FINANCING STATEMENT covers collateral, or is filed as a fixture filling. Description of real estate:	timber to be cut or as-extracted	16. Additional collateral	description:	10		
See Legal Description Attached and Parcel 3 (Perma 17-22-108-012-0000;	anent Index Numbers 17-22-108-013-0000; 7-22-108-015-0000) and			(Office	20511650
						2051
15. Name and address of a RECORD OWNE (if Debtor does not have a record interest)						
			able and check only one bo			
			Trustee acting with resp		perty held in trust or	Decedent's Estate
		18. Check only if application Debtor is a TRANSM	able and check <u>only</u> one bo ITTING UTILITY	DX.		•
			ith a Manufactured-Home	Transaction	n — effective 30 years	
		Filed in connection w	ith a Public-Finance Trans	action — ef	fective for 30 years	

UNOFFICIAL COPY



CHICAGO TITLE INSURANCE COMPANY

ORDER NUMBER: 1410 007999354 HL

STREET ADDRESS: 1455 S MICHIGAN AVENUE

COUNTY: COOK CITY: CHICAGO

TAX NUMBER: 17-22-108-015-0000

LEGAL DESCRIPTION:

PARCEL 1:

LOTS 29 AND 30 IN THE SUBDIVISION OF LAVANTIA SPRING ADMINISTRATRIX IN THE NORTHWEST FRACTIONAL 1/4 OF SECTION 22, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL APPIDIAN, (EXCEPT FROM SAID PREMISES SO MUCH AS IS TAKEN FOR PUBLIC ALLEY) IN COCK COUNTY, ILLINOIS.

THAT PART OF THE SOUTH 43 ACRES OF THE NORTHWEST FRACTIONAL 1/4 OF SECTION 22, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN; BOUNDED AND DESCRIBED AS FOLLOWS: BEGINNING IN THE EAST LINE OF MICHIGAN AVENUE AT A POINT 12.233 CHAINS NORTH OF THE SOUTH LINE OF SAID FRACTIONAL 1/4 SECTION (SAID POINT BEING ON THE SOUTH LINE OF LAND FORMERLY OF GILES SPRING) RUNNING THENCE EAST 160 FEET; THENCE SOUTH 25.70 FEET; THENCE WEST 160 FEET TO THE EAST LINE OF MICHIGAN AVENUE AND THENCE NORTH 25. 10 FRET TO THE POINT OF BEGINNING, BEING THE SAME AS ALL OF LOT 4 IN BLOCK 20 OF ASSISSOR'S DIVISION OF THE NORTHWEST FRACTIONAL 1/4 OF SECTION 22 AFORESAID (E.CEIT THAT PART TAKEN FOR PUBLIC ALLEY), IN COOK COUNTY, ILLINOIS

LOTS 1 AND 2 IN FOSTER AND BUSBY'S SUBDIVISION OF LCTS 11 TO 14 OF ASSESSOR'S DIVISION OF LOTS 2 AND 3 OF BLOCK 20 AND 8.94 FEET NORTY OF AND ADJOINING SAME OF ASSESSOR'S DIVISION OF PART OF THE NORTHWEST FRACTIONAL 1/4 OF SECTION 22, 20511650 TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.