2439/0129 11 001 Page 1 of 2002-10-18 15:30:18 Cook County Recorder

#### UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGEMENT TO: (Name and Address) First Bank of Highland Park 1835 First Street Highland Park, IL 60035



THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names 1a. ORGANIZATION'S NAME A. M. REALTY GROUF, L. C. SUFFIX MIDDLE NAME FIRST NAME 1b. INDIVIDUAL'S LAST NAME COUNTRY STATE POSTAL CODE 1c. MAILING ADDRESS **USA** 60035 IL HIGHLAND PARK 55 S. DEER PARK 1g. ORGANIZATIONAL ID #, if any 1f JURISDICTION OF ORGANIZATION ADD'L INFO RE 1e TYPE OF ORGANIZ TION 1d TAX ID #. SSN OR EIN NONE ORGANIZATION LIMITED LIABILITICO. DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one cebtr - n ame (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME SUFFIX MIDDLE NAME OR FIRST NAME 2b. INDIVIDUAL'S LAST NAME COUNTRY POSTAL CODE STATE CITY 2c. MAILING ADDRESS 2g. ORGANIZATIONAL ID #, if any 2f JURISDICTION OF ORGA VIZATION ADD'L INFO RE | 2e. TYPE OF ORGANIZATION 2d. TAX ID #: SSN OR EIN ORGANIZATION NONE DEBTOR 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - Insert only one secured party name ("a 3a ORGANIZATION'S NAME FIRST BANK OF HIGHLAND PARK SUFFIX MID DE NAME FIRST NAME 3b. INDIVIDUAL'S LAST NAME STATE POS AL CODE COUNTRY 3c MAILING ADDRESS HIGHLAND PARK IL **6**90?5. 1835 FIRST ST

4. This FINANCING STATEMENT covers the following collateral

All Fixtures which are located at the real property commonly known as 6748-50 North Ashland, Illinois Cook County, i reti ding but not limited to hot water heaters, cooling and heating equipment, sinks, plumbing fixtures, 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) and all accessions thereto, and replacements thereof including all proceeds therefrom, all of which are attached and made apart of the realty described hereon.

18t ALDERIGAN TYTLE order # NCS 2828 7 auck

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5. ALTERNATIVE DESIGNATION (if applicable)	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG LIEN	NON-DCC FILING
5. ALTERNATIVE DESIGNATION (il applicable)				ORT(S) on Debtor(s)	T	
This FINANCING STATEMENT is to be file ESTATE RECORDS. Attach Addendum	d [for record] (or recorded) in ]	if applicable) 7. Check to Re	GOEST SEARON REI	[optional]	All Debtors	Debtor 1 Debtor 2
ESTATE RECORDS. Attach Addendum		applicable) (ADDITION				

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	C FINANCING STATEMEN						
	OW INSTRUCTIONS (front and back) CA  AME OF FIRST DEBTOR (1a or 1b) ON		MENT	4			
_	9a ORGANIZATION'S NAME						
	A. M. REALTY GROUP,	L. L. C.					
OR	96. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFF	-IX			
10. N	MISCELLANEOUS:		<del></del>	_			
	000			THE ABOVE	SPACE I	S FOR FILING OFFIC	CE USE ONLY
11 /	ADDITIONAL DEBTOR'S EXACT FULL	LEGA, DAME - insert only one de	btor name (11a or 11b) - do	not abbreviate or combi	ne names		
	11a. ORGANIZATION'S NAME	ELO IL MININE - BISEROINY Offe de	AND DESIDE (THE DE TRO) - GO	desire-tate of settles			
OR	11b. INDIVIDUAL'S LAST NAME	<u> </u>	FIRST NAME		MIDDLE NAME		SUFFIX
11c.	MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
11d	TAX ID # SSN OR EIN   ADD'L INFO RE   1 ORGANIZATION DEBTOR	te TYPE OF ORGANIZATION	17. JURISDICTION OF OR	RGANIZATION	11g. ORG	ANIZATIONAL ID #, if ar	NONE
12.	ADDITIONAL SECURED PARTY'S	or ASSIGNOR S/P'S NAM	ME - insert only one name (	(12a or 12b)			
ľ	12a. ORGANIZATION'S NAME	<del></del>	97,				
			4/2	)			
OR	12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
12c	MAILING ADDRESS		CITY	$C_{\lambda}$	STATE	POSTAL CODE	COUNTRY
PAOFE AS THE CHARLES THE MACE	This FINANCING STATEMENT covers timbe collateral, or is filed as a fixture filing Description of real estate.  ARCEL 1: THE NORTH 125 FEET OF THE SOUTH LINE OF PRATT AVISET OF THAT PART WEST OF SHLAND AVENUE OF LOT 1 IN MAT PART LYING EAST OF THE RECTION 31, TOWNSHIP 41 NORTH AE THIRD PRINCIPAL MERIDIAN, AP THEREOF RECORDED MAY 9. ATS, PAGE 60, ALL IN COOK COUPARCEL 2: THE EAST 34 FEED DOITION TO ROGERS PARK, BEIT OUTHEAST 1/4 OF THE NORTH AIR OF THE NORTH AIR ORTH AIR OF THE NORTH AIR ORTH AIR OF THE NORTH AIR ORTH AIR OF THE NORTH AIR OF THE NORTH AIR OF THE NORTH AIR OF THE NORTH AIR OF SECTION 31, TOWNTHEAST 1/4 OF SECTION 3	OF THAT PART SOUTH ENUE OF THE EACT 64 THE WEST LINE OF THE SUBDIVISION OF IGHT OF WAY OF THE AILWAY COMPANY OF SOUTHEAST 1/4 OF I, RANGE 14, EAST OF ACCORDING TO THE I, 1872 IN BOOK 1 OF NTY, ILLINOIS. ET OF LOT 1 MANN'S NG A SUBDIVISION IN THEAST 1/4 OF THE	16. Additional collateral de	escription	YS	Office	
	Name and address of a RECORD OWNER of ab (if Debtor does not have a record interest):						
Commany Caoun hs: 6748-50 NO. ANRAMS CHOO, TC. PIN-11-31-408-808-4007		17. Check only if applicable and check only one box  Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate					
CHOO, The			18. Check only if applicable and check only one box  Debtor is a TRANSMITTING UTILITY				
	PIN-11-31-40	18 90 8 4 m.l	Filed in connection with	n a Manufactured-Home 1 n a Public-Finance Transa			
		l	L				

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UCC FINANCING STATEM FOLLOW INSTRUCTIONS (front and back)						
9. NAME OF FIRST DEBTOR (1a or 1b)		EMENT				
9a. ORGANIZATION'S NAME A. M. REALTY GROU		····				
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME,S	SUFFIX		و	
10. MISCELLANEOUS:						1197671
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11. ADDITIONAL DEBTOR'S EXACT FU	LL LEG'.L I IAME - insert only one d	lebtor name (11a or 11b)	- do not abbreviate or con	ibine names		
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OR ALL INDIVIDUALIS LAST NAME	<u> </u>	Terror Mane		MIDDLE	NAME	SUFFIX
11b. INDIVIDUAL'S LAST NAME	(	FIRST NAME		MIDOLE	THE C.	
11c. MAILING ADDRESS	0	CITY		STATE	POSTAL CODE	COUNTRY
ORGANIZATION DEBTOR		1/1 JURISDICTION O		11g ORG	GANIZATIONAL ID#, if a	ny NONE
12. ADDITIONAL SECURED PARTY	'S or ASSIGNOR S/P'S NA	AME - insert un', <u>ur</u> e na	ime (12a or 12b)			
12a. ORGANIZATION'S NAME		4	<b>6</b>			
OR 12b INDIVIDUAL'S LAST NAME		FIRST NAME	1	MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS		CITY	0/2	STATE	POSTAL CODE	COUNTRY
<ul> <li>13. This FINANCING STATEMENT covers to collateral, or is filed as a fixture filing.</li> <li>14. Description of real estate.</li> <li>RANGE 14, EAST OF THE THIR LYING EAST OF CLARK STREET ILLINOIS</li> </ul>	D PRINCIPAL MERIDIAN,	. 16. Additional collate	ral description	75		
15. Name and address of a RECORD OWNER o (if Debtor does not have a record interest)	of above-described real estate	Debtor is a Trust  18. Check only if app Debtor is a TRAN:	olicable and check <u>only</u> one or Trustee acting with restriction one SMITTING UTILITY  In with a Manufactured Hore on with a Public Finance Trans.	espect to propose box.	n — effective 30 years	Decedent's Estate

Harland Financial Solutions

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