## UNOFFICIAL COPSOS 06244 5590/0009 90 001 Page 1 of

5590/0009 90 001 Page 1 of 2 2003-03-05 08:37:32

Cook County Recorder

26.50

CC FINANCING STATEMENT	
OLLOW INSTRUCTIONS (front and back) CAREFULLY	

A. NAME & PHONE OF CONTACT AT FILER [optional]

4. This FINANCING STATEMENT covers the following collateral:

Dzenita Krvavac @773-751-0194

B. SEND ACKNOWLEDGEMENT TO: (Name and Address)

Community Bank of Ravenswood 2300 W. Lawrence Avenue Chicago, IL 60625 \_\_\_\_0030306244

2045815, MCDN 1	THE ABO	VE SPACE IS FO	R FILING OFFICE U	SE ONLY	
1. DEBTOR'S EXACT FULL LEG'L NAME - insert only of	ne debtor name (1a or 1b) - do not abbreviate or combine names				
1a. ORGANIZATION'S NAME BLUE BAYOU, LLC					
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX	
1c, MAILING ADDRESS 3734 NORTH SOUTHPORT AVE.	CHICAGO	STATE	POSTAL CODE 60613	COUNTRY	
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF CORGANIZATION L.L.C.	ORG NIZATION 11. JURISDICTION OF ORGANIZATION IL		ANIZATIONAL ID#, if an 12558	y none	
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME	- insert only one certor name (2a or 2b) - do not abbreviate or c	ombine names			
	NY, SUCCESSOR TRUSTEE TO M	MID TOWN	I BANK ANI	TRUST C	
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX	
2c. MAILING ADDRESS 500 W. MADISON STREET	CHICAGO	STATE	POSTAL CODE 60661	COUNTRY USA	
20. TAX ID #: SSN OR EIN ADD'L INFO RE   20. TYPE OF CORGANIZATION TRUST	PRESENTATION 21. JURISDICTION OF C SANIZATION IL	2g. ORG/	2g. ORGANIZATIONAL ID #, if any		
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIG	NEE of ASSIGNOR S/P) - insert only one secured party no ne	or 3b)			
3a. ORGANIZATION'S NAME COMMUNITY BANK OF RAVE	ENSWOOD	74,			
OR 36. INDIVIDUAL'S LAST NAME	FIRST NAME	WIDDLE	NAME	SUFFIX	
30. MAILING ADDRESS 2300 W. LAWRENCE AVENUE	CHICAGO	STA E	1 60625	COUNTRY	

. ALTERNATIVE DESIGNATION [if applicable]	LESSEE/LESSOR	CONSIGNEE/C	ONSIGNOR B	BAILEE/BAILOR	SELLER/BUYER	AG, LIEN	NON-UCC FILING
This FINANCING STATEMENT is to be fill ESTATE RECORDS. Attach Addendur	ed [for record] (or recorded)	in the REAL (if applicable)	<ol> <li>Check to REQUES [ADDITIONAL FEE</li> </ol>	ST SEARCH RÉPOR	T(S) on Debtor(s)	All Debtors	Debtor 1 Debtor 2
ODTIONAL EILED DEEEDENICE DATA							

All Inventory, Chattel Paper, Accounts, Equipment, General Intangibles, Fixtures and Furniture; whether any of the fixed 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; all proceeds relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds)

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	C FINANCING		ENT ADDENDUM					
_			ON RELATED FINANCING STAT	EMENT				
	9a. ORGANIZATION'S NA BLUE BAYO				1			
OR	9b. INDIVIDUAL'S LAST N	AME	FIRST NAME	MIDDLE NAME, SUFF	IX.			
10. 1	MISCELLANEOUS:		1	1	1			
11 /	ADDITIONAL DERTO	R'S EVACT EIL	LESAL NAME investority one	debter name (11a or 11b), do	.!		IS FOR FILING OFF	ICE USE ONLY
	ADDITIONAL DEBTO 11a. ORGANIZATION'S N		L LF GPL NAME - insert only one of	debtor name (11a or 11b) - do i	not abbreviate or combi	ine names		
		- · · · · -	0.					
OR	11b. INDIVIDUAL'S LAST	NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
11c. I	MAILING ADDRESS		0	CITY		STATE	POSTAL CODE	COUNTRY
11d.	TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	III. JURISDICTION OF ORG	GANIZATION	11g. ORG	GANIZATIONAL ID #, if a	Iny NONE
12.	ADDITIONAL SEC	JRED PARTY	S <u>or</u> ASSIGNOR S/P'S NA	AME - moort unit one name (1	2a or 12b)	<del>1</del>		
l	12a. ORGANIZATION'S N	AME		40.				
OR I	125. INDIVIDUAL'S LAST	NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
12c. I	MAILING ADDRESS			CITY	C	STATE	POSTAL CODE	COUNTRY
14. C LO NO NO RA	collateral, or is filed as a Description of real estate: T 10 IN BLOCK PRTHEAST 1/4 OPTHWEST 1/4 OF	fixture filing.  2 IN ROOD'S F THE SOU SECTION 20 THE THIRD P	S SUBDIVISION OF THE ITHWEST 1/4 OF THE TOWNSHIP 40 NORTH, RINCIPAL MERIDIAN, IN	16. Additional collateral des	cription:	Š		
No Bai No 500	f Debtor does not have a r rth Star Trust Con	ecord interest): npany, succes any of Chicag	above-described real estate esor trustee to Mid Town go, as Trustee under Trust	17. Check only if applicable Debtor is a Trust or 18. Check only if applicable Debtor is a TRANSMITTIM Filed in connection with a	rustee acting with resp and check <u>only</u> one box NG_UTILITY Manufactured-Home T	ect to prope	effective 30 years	Decedent's Estate