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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
J. Sheahan Trans # 10608

B. SEND ACKNOWLEDGEMENT TO: (Name and Address)

MB Financial Bank, N.A. Loan Documentation 1200 N Ashland Avenue Chicago, IL 60622 Doc#: 0405542186 Eugene "Gene" Moore Fee: \$30.00 Cook County Recorder of Deeds Date: 02/24/2004 10:36 AM Pg: 1 of 4

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 MPM ENTERPRISES 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 1c. MAILING ADDRESS STATE POSTAL CODE 6980 N. CENTRAL PARK AVENUE COUNTRY LINCOLNWOOD IL60712 USA 1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any **ORGANIZATION** LIMITED LIABILITY CO. 36-4400218 DEBTOR ILLINOTS 0047613-7 NONE 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only on for name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME OR 2b. INDIVIDUAL'S LAST NAME FIRST N/ ME MIDDLE NAME SUFFIX 2c. MAILING ADDRESS POSTAL CODE STATE COUNTRY 2d. TAX ID #: SSN OR EIN ADD'L INFO RE | 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZ' (10) ORGANIZATION 2g. ORGANIZATIONAL ID #, if any DEBTOR NONE 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name 3a / 25) 3a. ORGANIZATION'S NAME MB FINANCIAL BANK, N.A. OR 3b. INDIVIDUAL'S LAST NAME FIRST NAME MUDLE NAME SUFFIX 3c. MAILING ADDRESS 3232 W. PETERSON AVENUE STATE POST CODE COUNTRY **CHICAGO** Π L 60639

4. This FINANCING STATEMENT covers the following collateral:

All inventory, equipment, accounts (including but not limited to all health-care-insurance receivables), chattel paper, instruments (including but not limited to all promissory notes), letter-of-credit rights, letters of credit, documents, deposit accounts, investment property, money, other rights to payment and performance, and general intangibles (including but not limited to all software and all payment intangibles); all oil, gas and other minerals before extraction; all oil, gas, other minerals and accounts constituting as-extracted collateral; all fixtures; all timber to be cut; all attachments, accessions, accessories, fittings, increases, tools, parts, repairs, supplies, and commingled goods relating to the foregoing property, and all additions, replacements of and substitutions for all or any part of the foregoing property; all insurance refunds relating to the foregoing property; all good will relating to the foregoing property; all records and data and embedded software relating to the foregoing property, and all equipment, inventory and software to utilize, create, maintain and process any such records and data on electronic media; and all supporting obligations relating to the foregoing property; all whether now existing or hereafter arising, whether now owned or hereafter acquired or whether now or hereafter subject to any rights in the foregoing property; and all products and proceeds (including but not limited to all insurance payments) of or relating to the foregoing property. (TO BE FILED WITH THE COOK COUNTY RECORDER)

6,	ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNECONSIGNOR BAILEE/BAILOR SELLER/BUYE This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL STATE RECORDS Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	, JAG. EIEN	NON-UCC FILING

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FOLLOW INSTRUCTIONS (front and back) 9. NAME OF FIRST DEBTOR (1a or 1b)	CAREFULLY	FMENT				
9a. ORGANIZATION'S NAME MPM ENTERPRISES,			1			
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS:			1			
	<u> </u>		<u> </u>		IS FOR FILING OFFIC	CE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FU	JLL LECAL NAME - insert only one d	ebtor name (11a or 11b) - do no	ot abbreviate or combi	ne names		
OR 11b. INDIVIDUAL'S LAST NAME	Ox.	FIRST NAME		MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS	0	СТҮ		STATE	POSTAL CODE	COUNTRY
11d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR		11f. JURISDICTION OF ORG	ANIZATION	11g. ORG	SANIZATIONAL ID #, if ar	NONE
12. ADDITIONAL SECURED PART 12a. ORGANIZATION'S NAME	Y'S <u>or</u> ☐ ASSIGNOR S/P'S NA	ME - insr it on y o <u>ne</u> name (12	a or 12b)			
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS		СІТУ		STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers to collateral, or is filed as a fixture filing. 14. Description of real estate: THAT PART OF THE SOUTH 1/2 OF SECTION 35, TOWNSHIP 41 I OF THE THIRD PRINCIPAL MERI THE NORTH LINE OF THE SOUTH NORTH 26.11 ACRES WEST (CENTRAL PARK AVENUE, NORTH WITH AND 148.0 FEET SOUTH THE WEST LINE OF CENTRAL SOUTH LINE OF THE NORTH 8.0 1/2 OF THE NORTHWEST 1/4 OF OF THE RIGHT OF WAY O NORTHWESTERN RAILROAD (FOR RAILROAD COMPANY) DESCRIBE BEGINNING AT THE INTERSECTI OF THE NORTH 8.03 ACRES OF T	OF THE NORTHWEST 1/4 NORTH, RANGE 13, EAST IDIAN, LYING SOUTH OF TH 18.08 ACRES OF THE DF THE WEST LINE OF TH OF A LINE PARALLEL (AS MEASURED ALONG PARK AVENUE) OF THE 3 ACRES OF THE SOUTH SECTION 35, AND PART F THE CHICAGO AND PRIMERLY THE JUNCTION D AS FOLLOWS: ON OF THE SOUTH LINE	16. Additional collateral desc	ription:	Ś		
15. Name and address of a RECORD OWNER of (if Debtor does not have a record interest):						
		17. Check only if applicable a Debtor is a Trust or Trust 18. Check only if applicable a Debtor is a TRANSMITTING Filed in connection with a N Filed in connection with a R	ustee acting with resp nd check <u>only</u> one box G UTILITY Manufactured-Home T	ect to prope	— effective 30 years	ecedent's Estate

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UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY					
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STA	TEMENT				
92. ORGANIZATION'S NAME MPM ENTERPRISES, L.L.C.					
OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS:					
11. ADDITIONAL DEBTOR'S EXACT FULL (EC AL NAME - insert only one 11a. ORGANIZATION'S NAME	debtor name (11a or 11b) - do no			IS FOR FILING OFFI	CE USE ONLY
Ox					
OR 11b. INDIVIDUAL'S LAST NAME	FIRST NAME	W	MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
11d. TAX ID #: SSN OR EIN ADD'L INFO RE 11e. TYPE OF ORGANIZATION DEBTOR	11f. JURISDICTION OF ORGA	NIZATION	11g. ORG	I BANIZATIONAL ID #, if a	ny NONE
12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S N 12a. ORGANIZATION'S NAME	AME - inse tonl one name (12a	or 12b)			NONE
OR	Y/yx				
12b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	IAME	SUFFIX
12c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a fixture filing. 14. Description of real estate: 1/2 OF THE NORTHWEST 1/4 OF SAID SECTION 35, WITH THE WEST LINE OF CENTRAL PARK AVENUE AS DEDICATED BY DOCUMENT 19711305 RECORDED JANUARY 14, 1966; THENCE SOUTH ALONG THE SAID WEST LINE, A DISTANCE OF 148 FEET; THENCE WEST ALONG A LINE PARALLEL WITH SOUTH LINE OF THE NORTH 8.03 ACRES OF THE SOUTH 1/2 OF THE NORTHWEST 1/4 OF SECTION 35, A DISTANCE OF 198.84 FEET; THENCE NORTHERLY ALONG A LINE WHICH FORMS AN ANGLE OF 66 DEGREES 21 MINUTES 10 SECONDS WITH SAID PARALLEL LINE, AS MEASURED FROM EAST TO NORTH SAID LINE BEING 8.5 FEET MEASURED AT RIGHT ANGLES TO THE CENTER LINE OF THE MOST EASTERLY RAILROAD TRACK, A DISTANCE OF 161.51 FEET TO ITS INTERSECTION WITH SAID SOUTH LINE OF	16. Additional collateral descri		Ś		
	Debtor is a Trust or Trus 18. Check only if applicable and Debtor is a TRANSMITTING	tee acting with respect check only one box. UTILITY			ecedent's Estate
	Filed in connection with a Ma			-	
	Filed in connection with a Pu	onc-rinance (ransacti	on — effec	ctive for 30 years	

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9.	OLLOW INSTRUCTIONS (front and bac	k) CAREFULLY				
	NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING ST	ATEMENT			
	9a. ORGANIZATION'S NAME MPM ENTERPRISES					
OF	9b. INDIVIDUAL'S LAST NAME					
	90, INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
10	D. MISCELLANEOUS:					
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	ADDITIONAL DEBTOR'S EXACT F 11a. ORGANIZATION'S NAME	OLL SEVAL NAIVE - insert only one	debtor name (11a or 11b) - do not a	bbreviate or combine na	mes	
~~		Or				_
OR	11b. INDIVIDUAL'S LAST NAME		FIRST NAME	IMID	DLE NAME	SUFFIX
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11c.	: MAILING ADDRESS	0	CITY	STA	TE POSTAL CODE	COUNTR
114	. TAX ID #: SSN OR EIN ADD'L INFO RE	C				
ч.	ORGANIZATION		11f. JURISDICTION OF ORGANIA	ZATION 11g.	ORGANIZATIONAL ID #, if	any
2.	ADDITIONAL SECURED PARTY	CS ASSIGNOR OURIS				
	ADDITIONAL SECURED PART	ASSIGNOR S/P'S N	AME - inse con one name (12a or	126)		
_			46			
R	12b. INDIVIDUAL'S LAST NAME		FIRST NAME	- INIO	O F MANAGE	
				MIDL	DLE NAME	SUFFIX
2c.	MAILING ADDRESS		CITY	STAT	E POSTAL CODE	COUNTRY
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٠.	This FINANCING STATEMENT					
TH NC AL PE	This FINANCING STATEMENT covers to collateral, or is filed as a fixture filing. Description of real estate: HE NORTH 8.03 ACRES OF TORTHWEST 1/4 OF SAID SECTIONS SAID SOUTH LINE, A DISCOUTH POINT OF BEGINNING, IN ERMANENT INDEX NUMBER 1(0)-35-135-012-0000) AND COMMITTED CONTRAL PARK AVENUE LINCOUTH	HE SOUTH 1/2 OF THE FION 35; THENCE EAST STANCE OF 137.89 FEET COOK COUNTY, ILLINOIS 0-35-135-007-0000 AND MONLY KNOWN AS 6990	16. Additional collateral description	7,0	Office	
4. TH NC AL (PE 10 N.	collateral, or is filed as a magnitude filling. Description of real estate: HE NORTH 8.03 ACRES OF TORTHWEST 1/4 OF SAID SECTONG SAID SOUTH LINE, A DISTRIBUTED THE POINT OF BEGINNING, IN ERMANENT INDEX NUMBER 10-35-135-012-0000) AND COMN	HE SOUTH 1/2 OF THE FION 35; THENCE EAST STANCE OF 137.89 FEET COOK COUNTY, ILLINOIS 0-35-135-007-0000 AND MONLY KNOWN AS 6980 DLNWOOD, IL 60712	17. Check <u>only</u> if applicable and ch Debtor is a ☐ Trust or ☐ Trustee 18. Check <u>only</u> if applicable and ch ☐ Debtor is a TRANSMITTING UTI	eck <u>only</u> one box. acting with respect to prieck <u>only</u> one box.	operty held in trust or De	ecedent's Estate
FHOLION.	collateral, or is filed as a fixture filling. Description of real estate: HE NORTH 8.03 ACRES OF TORTHWEST 1/4 OF SAID SECTONG SAID SOUTH LINE, A DISTRIBUTION OF BEGINNING, IN ERMANENT INDEX NUMBER 10-35-135-012-0000) AND COMMICENTRAL PARK AVENUE LINCO	HE SOUTH 1/2 OF THE FION 35; THENCE EAST STANCE OF 137.89 FEET COOK COUNTY, ILLINOIS 0-35-135-007-0000 AND MONLY KNOWN AS 6980 DLNWOOD, IL 60712	17. Check <u>only</u> if applicable and ch Debtor is a ∏ Trust or ∏ Trustee 18. Check <u>only</u> if applicable and ch	eck <u>only</u> one box. acting with respect to preck <u>only</u> one box. LITY actured-Home Transaction	operty held in trust or De	ecedent's Estate