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MOS FINANCIA						
FOLLOW INSTRUCTION	NG STATEMENT IS (front and back) CAREFULLY 6703	2210	g-4100	040177		
A. NAME & PHONE OF	CONTACT AT FILER (optional)	Doc#: 0410649177 Eugene "Gene" Moore Fee: \$28.00				
POST CL	OSF DEPT	Eugene "Gene Mooro" Cook County Recorder of Deeds Date: 04/15/2004 03:29 PM Pg: 1 of 3				
B. SEND ACKNOWLEDG	GMENT TO: (Name and Address)					
CHARTE	R ONE BANK, N.A.					
ATTN: BU	JSINESS BANKING DEPT.	EV-352				
1215 SUPI	ERIOR AVENUE	127-332				
	AND, OHIO	ı				
	, om	ll l				
		 -∤ i				
1. DEBTOR'S EXACT CU	LEGAL NAME - insert only one debtor name	(1a or 1b) – do not abbreviate or combin	ABOVE SPA	CE IF FOR FILING OFFIC	E USE ONLY	
1a. ORGANIZATION'S I	V/we	or not appreviate of Compil	e names			
OR	0					
1b. INDIVIDUAL'S LAST LEMONCE	NAME	FIRST NAME	MIDDLE	NAME	Tava-	
	LLO CY	MARCO		- MANUE	SUFFIX	
1c. MAILING ADDRESS		CITY	STATE			
<u> 1422 WILLIAM</u>		RIVER FOREST	IL		COUNTRY	
1d. TAX ID#: SSN OR EIN	ADD'NL INFO RE 18. TO SE JE ORGANIZATION ORGANIZATION	1f. JURISDICTION OF ORGANIZATION		60305 ANIZATIONAL I.D.#, if an	<u>USA</u>	
	DEBTOR	I.				
2. ADDITIONAL DEBTOR'S	S EXACT FULL LEGAL NAME - NEGRI CRIV ONE	debtor name (2a or 2b) - do not abbrevi	ate or combi	ne names	NONE	
2a. ORGANIZATION'S N	AME	A				
OR CI. INDIA		_				
	2b. INDIVIDUAL'S LAST NAME		MIDDLE NAME SUFE		SUFFIX	
LEMONCELI 2c. MAILING ADDRESS	LO	NANCY	M.	м		
		CITY	STATE	POSTAL CODE	COUNTRY	
1422 WILLIAM		RIVERFOREST	IL	60305	USA	
2d. TAX ID#: SSN OR EIN	ADD'NL INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION	2f. JURISDICTION C C. GANIZATION		ANIZATIONAL I.D.#, if any		
	DEBTOR		i		_	
3. SECURED PARTY'S NAM	ME (or NAME of TOTAL ASSIGNEE OF ASSIGNOR S	i/P) - insert only one secured par / nam/ (3a or	3b)		NONE	
DE ONGANIZATION S NA	WE.					
	ONE BANK, N.A.		5.4			
3b. INDIVIDUAL'S LAST N	NAME	FIRST NAME	MIDDLE	NAME	SUFFIX	
2- 1444 100 4777		·	0.1		1	
		CITY	STATE	FOSTAL CODE	COUNTRY	
1215 SUPERIOR AVENUE		CLEVELAND	ОН	04114	USA	
4. This FINANCING STATEMEN	T covers the following collateral:				USA	
located, as more partic	of the Debtor respecting that certain p ularly described in Exhibit A attached	arcel of land and the structures a	nd improv	emer <i>is</i> at wor he	reafter thereon	
existing, belonging or r	ertaining thereto: (ii) all goods furnit	the eto (the Property"), togethe	r with: (i)	all rights how or h	iereafter	
instruments, proceeds	of insurance, general intangibles and or used	other items of personal property	res, accou	nts, contract right	s, documents,	
			ewals ther	eof; and (v) all con	tracts,	
	specting the use, operation or mainten North California, Chicago, Illinois 60				-	
	, Onzengo, miniola 00	THE STATE OF THE S				

5. ALTERNATIVE DESIGNATION (if applicable). LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/B	AILOR SELLER/BUYER AGLIEN NON-LICC FILING
C The Filler on a Committee of the Commi	CH REPORT(S) on Debtor(s) All Debtors Debtor 1 Debtor 2
TO BE FILED WITH: ILYENOUS SECRETARY OF SEATE	COOK COUNTY RECORDER

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FOLLOW INSTRUCTIONS (front and be	EMENT ADDENDUN ock) Careful y	1				
9. NAME OF FIRST DEBTOR (1a or 1	b) ON RELATED FINANCING S	TATEMENT				
9a. ORGANIZATION'S NAME						
OR Shall Michael Control						
96. INDIVIDUAL'S LAST NAME LEMONCELLO	FIRST NAME MARCO	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS:	MARCO	A.				
	4					
	•					
		İ				
			THE ABOVE SPACE	IS FOR FILING OFF	ICE LIGE ON V	
11. ADDITIONAL DEBTOR'S LY CY FI	JLL LEGAL NAME - insert only one r	ame (11a or 11b) - do not abbrevial	te or combine names	13 FOR FILING OFF	ICE USE ONLY	
11a. ORGANIZATION'S NAME	0		The state of the s			
OR 11b. INDIVIDUAL'S LAST NAME	<u> </u>					
I ID. INDIVIDUAL 5 LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX	
11c. MAILING ADDRESS		CITY		1		
	9).		STATE	POSTAL CODE	COUNTRY	
11d. TAX ID#: SSN OR EIN ADD'L INFO R	E 11e. TYPE OF ORGA VIZATION	11f. JURISDICTION OF ORGANIZA	ATION 11a ORG	GANIZATIONAL ID#, If a		
ORGANIZATIO DEBTOR				, , , , , , , , , , , , , , , , , , ,	NONE	
12 ADDITONAL SECURED PART	Y'S or ASSIGNOR S/F S	NAME - insert only one name (12	2a or 12b)		NONE	
12a. ORGANIZATION'S NAME		τ_{\sim}	<u>'</u>	· · · · · · · · · · · · · · · · · · ·		
OR 12b. INDIVIDUAL'S LAST NAME	·	FIRST NAME	- Innient		·	
		FIRST MANE	MIDDLE	NAME	SUFFIX	
12c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY	
		//×,			Cooming	
13. This FINANCING STATEMENT covers	timber to be cut or as-extracted	16. Additional collateral description				
collateral, or is filed as a fixture filling 14. Description of real estate :						
OFO Namely California Cold	YIII 1 20200					
858 North California, Chicag	go, Illinois 60622					
			C/6/7/6			
			. 0,			
				Office		
				Vic.		
				Ó		
15 Name and address of a DECORD OVERS	ad about desired to the					
 Name and address of a RECORD OWNER (if Debtor does not have a record interest): 	of above-described real estate					
		17. Check only if applicable and	check only one box			
			tee acting with respect to p	roperty held in Irusi or	Decedent's Estate	
		18. Check only if applicable and check only one box.				
		Debtor is a TRANSMITTING U				
		Filed in connection with a Manu				
		Filed in connection with a Publi	ic-Finance Transaction - effe	ctive 30 years		

FILING OFFICE COPY —NATIONAL UCC FINANCING STATEMENT ADDENDUM (FORM UCC1Ad) (REV. 07/29/98)

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LEGAL DESCRIPTION:

LOT 31 IN OSGOOD AND MUIR'S SUBDIVISION IN THE EAST 1/2 OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/40F SECTION 1, TOWNSHIP 39 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

PROPERTY ADDRESS: 4801 WEST FULLERTON, CHICAGO, IL 60639

PIN NO. 16-01-326-033

