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#### **UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141 B. SEND ACKNOWLEDGEMENT TO: (Name and Address) 510145 IFIRSTCHOICE 6451112 **UCC Direct Services** P.O. Box 29071 ILIL Glendale, CA 91209-9071 **FIXTURE** 



Doc#: 0432216113 Eugene "Gene" Moore Fee: \$30.50 Cook County Recorder of Deeds Date: 11/17/2004 12:58 PM Pg: 1 of 4

	•		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY						
1. E	EBTOR'S EXACT FULI	LEGAL LAME -	insert only one debtor name (1a	or 1b) - do not	abbreviate or combine	names			
OR	19. ORGANIZATION'S NAME NEMS, INC.								
UK	1b. INDIVIDUAL'S LAST NAME			FIRST NAME			MIDDLE		SUFFIX
	N. FIRST AV	ENUE	Ojc	MAYW	OOD		STATE  L	60153	COUNTRY
1d.	SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	18. TYPE OF ORGANIZATION CORPORATION	1f. JURISDICT	ON OF ORGANIZATION		_	ANIZATIONAL ID#, if any 84231	NONE
2. /	ADDITIONAL DEBTOR'S	EXACT FULL LI	EGAL NAME - insert only <u>ne</u> le	htor name (2a	or 2b) - do not abbrevia	te or co	mbine r	ames	<u> </u>
	MAYWOOD	CITGO	7			•			
OR	2b. INDIVIDUAL'S LAST N	NAME		FINST NAME	·		MIDDLE	NAME	SUFFIX
	MAILING ADDRESS N. FIRST AV	'ENUE		MAYW	OOD		STATE	POSTAL CODE 60153	COUNTRY
2d.	SEE INSTRUCTIONS	ADD'L INFO RE	2e. TYPE OF ORGANIZATION	2f. JURISDICT	ION OF OPSANIZATION		2g. ORG	ANIZATIONAL ID #, if any	_
		ORGANIZATION DEBTOR	CORPORATION		IL				XNONE
3. 5	SECURED PARTY'S NA	ME (or NAME of	TOTAL ASSIGNEE of ASSIGNO	R S/P) - insert	arty و only <u>one</u> secured	name (	3a or 3t	)	
	39 ORGANIZATION'S NA FIRST CHOI				(0)	2			
OR	3b. INDIVIDUAL'S LAST I	NAME		FIRST NAME	, t. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		MIDDLE	NAME	SUFFIX
3°C	MAILING ADDRESS 000 WEST ST	ATE STRI	EET SUITE E	GENE\	/A	,	STA (E	FO134	COUNTRY

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 offware and all payment intangibles); all oil, gas and 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.

15-11-210-090-	-0060	4.	
5. ALTERNATIVE DESIGNATION [if applicable] LESSEE/LESSOR		E/BAILOR SELLER/BUYER	AG. LIEN NON-UCC FILING
[X] This FINANCING STATEMENT is to be filed [for record] (or recorded ESTATE RECORDS. Attach Addendum	f) in the REAL 7. Check to REQUEST SE fif applicable [ADDITIONAL FEE]	EARCH REPORT(S) on Debtor(s)  [optional]	All Debtors Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA			

6451112

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IAME OF CIDET DEDTOD (44 A- 4)	pack) CAREFULLY D) ON RELATED FINANCING STA	TEMENT	7			• .
9a. ORGANIZATION'S NAME	J) ON RELATED TIMENOUS OF THE					٠
NEMS, INC.		THE PARTY OF THE P	_			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
MISCELLANEOUS			7			, is
51112-40-1						
0145 IFIRSTCHOICE		•				
·C						
with: Cook+, IL			THE ABOVE	SPACE IS FOR	FILING OFFICE US	E ONLY
ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only o	<u>ne</u> name (11a or 11b) - do n	ot abbreviate or con	nbine names		· · · · · · · · · · · · · · · · · · ·
11a. ORGANIZATION'S NAME	9					
11b, INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE N	IAME	SUFFIX
		<u>.</u>				- COLINTON
MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
. SEE INSTRUCTION ADD'L INF	O RE 11e. TYPE OF ORGANIZATION	Ar. JURISDICTION OF C	RGANIZATION	11g. OR0	SANIZATIONAL ID #,	if any
ORGANIZA DEBTOR		4				NONE
		s NAME - insert only one na	me (12a or 12h)			
ADDITIONAL SECURED PA	RIY'S or ASSIGNORS/P	S NAME - Ser. Thy one ha	ine (128 or 120)			
		4		L. SSI E.	10.145	SUFFIX
12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
, MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
			()	· ·		
This FINANCING STATEMENT covers	timber to be cut or as-extrac	ted 16. Additional collateral	description:	,		
collateral or is filed as a X fixture f	Liling.		4	-/		
Description of real estate:			•	5		
escription: THAT PART OF	LOT 2 IN ASSESSOR'S				)	•
IVISION OF PART OF THE	NORTHEAST 1/4 OF	·				
F THE THIRD PRINCIPAL	NORTH, RANGE 12 EAS MERIDIAN, DESCRIBED A	S.			· (C)	
OLLOWS: BEGINNING AT	THE POINT OF ST LINE OF FIRST AVENU	]			(0)	•
ND THE SOUTHERLY LINE	E OF LAKE STREET, SAID					•
DINT BEING AT THE INTERAWN PARALLEL WITH A	ND 33 FEET EAST OF TH	E".	•			
FST LINE OF SAID LOT 2	(NORTH AND SOUTH					•
ENTER LINE OF SAID SEC RAWN 33 FEET SOUTHER	RLY AT RIGHT ANGLES TO	$o^{\cdot}$				
ND PARALLEL WITH THE	NORTHERLY LINE OF SA	ID				
OT 2, BEING THE SOUTHE TREET): RUNNING THEN	CE SOUTH, ALONG THE S	AID				· ·
. Name and address of a RECORD OWN						
(if Debtor does not have a record inte	rest):		Name and Advantage of the	hav		
		17. Check only if applicated Debtor is a Trust or			perty held in trust	or Decedent's Estate
		18. Check only if applica	<u> </u>			<u> </u>
			MITTING UTILITY			
		DEDICT IS A TRANSPORT	WILLIAM OTHERS			
			with a Manufactured-Ho	ome Transaction	n effective 30 years	

0432216113 Page: 3 of 4

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NAME OF FIRST DEBTOR (1a or 1b	ON RELATED FINANCING STAT	rement			•	
9a. ORGANIZATION'S NAME						
NEMS, INC.	FIRST NAME	MIDDLE NAME, SUFFIX	-			
9b. INDIVIDUAL'S LAST NAME	FIRST MANUE					
AND OF LANEOUS						
, MISCELLANEOUS			1			
451112-40-1						
10145 IFIRSTCHOICE			1			
			1			
ile with: Cook+, IL						
*	0.				FILING OFFICE USE	ONLY
I. ADDITIONAL DEBTOR'S EXACT F	ULL L'_GA' NAME - insert only or	<u>ne</u> name (11a or 11b) - do n	ot abbreviate or com	bine names		
11a. ORGANIZATION'S NAME						
R 11b. INDIVIDUAL'S LAST NAME	<del></del> 0x	FIRST NAME		MIDDLE N	IAME	SUFFIX
- INDIVIDUAL 3 DAGY NAME						
1c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
	<u> </u>			11- 086	SANIZATIONAL 1D #, if	any
1d. SEE INSTRUCTION ADD'L INFO		11f. JURISDICTION OF C	RGANIZATION	I Ig. ORC	3A(4)ZA ( 1014AC 10 #; 11	u., ∏ NON
DEBTOR						
ADDITIONAL SECURED PA	RTY'S or ASSIGNOR S/P's	s NAME insert only one na	ame (12a or 12b)			
12a. ORGANIZATION'S NAME		0,				
		FIRST NAME		MIDDLE	NÄME	SUFFIX
12b. INDIVIDUAL'S LAST NAME		FIRST NAME				
2c. MAILING ADDRESS	:	CITY		STATE	POSTAL CODE	COUNTRY
2C, MAILING ADDICESS	* .		し			
	timber to be cut or as-extrac	ted 16. Additional collateral	description:		<u> </u>	<u> </u>
13. This FINANCING STATEMENT covers collateral or is filed as a fixture filed.		10.714011071070070				
Collateral of is fired as a			<i>.</i> (	0.		
14. Description of real estate:				0		
LINE DRAWN PARALLEL W	ITH AND 33 FEET EAST O	F			xc_	
THE WEST LINE OF SAID LO LINE OF FIRST AVENUE) A	OT 2, (BEING THE EAST DISTANCE OF 177.38 FEE	ET:				
THENCE FAST, AT RIGHT A	NGLES TO THE LAST	,			C	
DESCRIBED LINE, A DISTAI THENCE NORTHEASTERLY	NCE OF 112.61 FEET; / ALONG A LINE FORMIN	g			0	
AN ANGLE OF 113 DEGREE	S 25 MINUTES 19 SECON	IDS				
FROM WEST TO NORTH TO DESCRIBED LIEN, A DISTA	NCF OF 82.21 FEET:				**	
THENCE NORTHERLY, ON	A LINE DRAWN PARALLE	L				
WITH THE SAID WEST LINE 64.64 FEET TO THE SOUTH	OF LOT 2, A DISTANCE	OF				
STREET SAID SOUTHERLY	Y LINE BEING 33 FEET				•	
SOUTHERLY AT RIGHT AN WITH THE NORTHERLY LIN	GLES TO AND PARALLEL IF OF SAID LOT 2: THENC	æ				
15. Name and address of a RECORD OWN						
(if Debtor does not have a record inte	rest):					
		17. Check only if applic	able and check only one	box.		
		Debtor is a Trust or	Trustee acting with	respect to pro	perty held in trust o	Decedent's Est
		18. Check only if applic	able and check <u>only</u> one	box.		
	,	Debtor is a TRANS		_	مماريم	
		11 1	with a Manufactured-Howith a Public-Finance T			
				ransaction 6	mective 30 years	

### UNOFFICIAL COPY

FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY					
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEM	MENT				
9a. ORGANIZATION'S NAME					
NEMS, INC.					
9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS					•
6451112-40-1					
510145 IFIRSTCHOICE					
	·				
jb					
File with: Cook+, IL		THE ABOVE SPA	ACE IS FOR FI	LING OFFICE USE O	NI Y
11. ADDITIONAL DEBTOR'S EXACT FULL 1 2G^L NAME - insert only one n	ame (11a or 11b) - do not s				
11a. ORGANIZATION'S NAME	ane (11a or 11b) - do not e	objectate of comon	io namos		
OR 11b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAM	4E	SUFFIX
	t.				
11c. MAILING ADDRESS	CITY		STATE PO	STAL CODE	COUNTRY
11d. SEE INSTRUCTION ADD'L INFO RE 11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORG	ANIZATION	11g. ORGAN	IIZATIONAL ID#, if a	ny
ORGANIZATION DEBTOR		<u> </u>			NONE
12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P's NA	AML - insert only <u>one</u> name	(12a or 12b)			
12a. ORGANIZATION'S NAME	0/				
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAN	AF	SUFFIX
120. INDIVIDUAL S LAST NAME	LIKO WAWE			-	
12c. MAILING ADDRESS	CITY		STATE PO	STAL CODE	COUNTRY
				•	
13. This FINANCING STATEMENT covers timber to be cut or as-extracted	16. Additional collateral desc	ription			
collateral or is filed as a fixture filing.	70. Modition of states at 2000	74,			
<u>.</u>		2, 1	)		
14. Description of real estate:		O	0,5		
NORTHWESTERLY, ALONG THE SAID SOUTHERLY LINE, A DISTANCE OF 150 FEET TO THE POINT OF	,		U <sub>x</sub>		
BEGINNING (EXCEPTING THEREFROM THAT PART OF	4				
THE LAND AS CONDEMNED IN CASE NO. 86L51388)	e .			$C_{\lambda}$	
ALL IN COOK COUNTY, ILLINOIS. Parcel ID: 15-11-210-090-0000				()	
•					
	: · · ·				
Name and address of a RECORD OWNER of above-described real estate     (if Debtor does not have a record interest):					
	17. Check only if applicable a	nd check only one box			
	Debtor is a Trust or			held in trust or	Decedent's Estate
	18. Check only if applicable a	ind check <u>only</u> one box.	· · · · · · · · · · · · · · · · · · ·		
	Debtor is a TRANSMITT	ING UTILITY			
	Filed in connection with				
	Filed in connection with	a Public-Finance Trans	action effecti	ve 30 years	