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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] DILIGENZ, INC. (800) 858-5294 B. SEND ACKNOWLEDGMENT TO: (Name and Address) 12086417 DILIGENZ, INC. 6500 HARBOUR HEIGHTS PKWY SUITE 400 **MUKILTEO WA 98275** Filed In: Illinois Cook

Doc#: 0508022111 Eugene "Gene" Moore Fee: \$26.50 Cook County Recorder of Deeds Date: 03/21/2005 09:38 AM Pg: 1 of 2

	THE ABOVE	SPACE IS FO	R FILING OFFICE USE	ONLY
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names			
Z & B PROPERTIES L.L.C.				
OR 15. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
1c. MAILING ADDRESS	city	STATE	POSTAL CODE	COUNTRY
2555 W. FULLERTON	CHICAGO	IL	60647-0000	USA
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1a. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if any	
ORGANIZATION LIMITED LIAP	IL IL			¥ NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only con-	ு ுட் name (2a or 2b) - do not abbreviate or com	bine names		
28. ORGANIZATION'S NAME	7			
OR 2b. INDIVIDUAL'S LAST NAME	FIRST N .ME	MIDDLE NAME		SUFFIX
2c. MAILING ADDRESS	any 4	STATE	POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION DEBTOR	27. JURISDICTION OF ORCAN ATION	2g. ORG	ANIZATIONAL ID #, if any	NON
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGN 38. ORGANIZATION'S NAME	OR S/P) - insert only one secured party name (3s or	b)		
MB FINANCIAL BANK, N.A.		(O).		
3b. INDIVIDUAL'S LAST NAME	FIRSTNAME	MIFULE NAME		SUFFIX
3c. MAILING ADDRESS	CITY	STATI	TFOSTAL CODE	COUNTRY
2 S. LASALLE STREET	CHICAGO	IL	65663-0000	USA

4.	This FINANCING STATEMENT covers the following colleteral:				
I	ALL FIXTURES AND PERSONAL BELONGING TO THE DEBTOR/GI	RANTOR USI	ED IN CONNECTIO	ON WITH THE SUBJEC	TCOLLATERAL
F	PROPERTIES AS LISTED BELOW; WHETHER ANYOF THE FOREGO	DING IS OWN	ED NOW OR ACQ	UIRED LATER; ALL A	CCESSIONS,
1	ADDITIONS, REPLACEMENTS, AND SUBSTITUTIONS RELATING	TO ANY OF T	THE FOEGION; AL	L RECORDS OF ANYK	II ID KELAING TO
1	ANY OF THE FOREGOIN: ALL PROCEEDS RELATING TO ANY OF	THE FOREGI	ON (INCLUDING I	INSURANCE, GENREA	L IN AN GIBLES AND
Ĭ	ACCOUNTS PROCEEDS) COLLATERAL PROPERTY COMMONLY K	KNOWN AS 2	955-57 N. KEDZIE,	, CHICAGO, IL. PIN #13	3-25-119-001-0000

5. ALTERNATIVE DESIGNATION If application: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING
V. 12. 22. 11. 11. 11. 11. 11. 11. 11. 11
6 This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL 7 Check to REQUEST SEARCH REPORT(S) on Debtor(s)
ESTATE RECORDS. Attach Addendum [if spolicable] [ADDITIONAL FEE] [optional] All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA



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UCC FINANCING STAT	TEMENT ADDENDUM		-			
FOLLOW INSTRUCTIONS (front and	J BBCK) CAREFULLT	TEMENT	1			
9. NAME OF FIRST DEBTOR (18	or 1b) ON RELATED FINANCING STA	I CIAICIA I	-			
9a, ORGANIZATION'S NAME						
Z & B PROPERTIE	έS L.L.C		_			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFI				
10. MISCELLANEOUS:						
	0			ACE I	S FOR FILING OFFI	CE USE ONLY
11. ADDITIONAL DEBTOR'S EXA 11s. ORGANIZATION'S NAME	CT FULL LF GA' NAME - insert only one r	ame (11a or 11b) - do not abb	reviate or compine names			
OR 11b. INDIVIDUAL'S LAST NAME	0,5	FIRST NAME	M	IDDLE N	IAME	SUFFIX
11c. MAILING ADDRESS	O,	СТҮ	S	TATE	POSTAL CODE	COUNTRY USA
11d. TAX ID #: SSN OR EIN ADD'L III ORGANI DEBTOR	NFO RE 11e. TYPE OF ORGANIZATION	(17, JURISDICTION OF OR	GANIZATION 11	g. CRG	ANIZATIONAL ID #, if a	nny X NON
		NAME - insert only one na	me (12a or 12b)			
12. ADDITIONAL SECURED I 12a. ORGANIZATION'S NAME	PARTIS & ASSIGNANCE	O NAME WAS IN				
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME	M	IDDLÉ I	NAME	SUFFIX
12c. MAILING ADDRESS		CITY		TATE	POSTAL CODE	USA
13. This FINANCING STATEMENT cover collateral, or is filed as a 1 fixture 14. Description of real estate: LOTS 47 AND 48 IN BENTLEY 1/2 OF THE NORTHWEST 1/4 THE NORTHWEST 1/4 OF SE NORTH, RANGE 13, EAST OF MERIDIAN, IN COOK COUNT	o filing. Y'S SUBDIVISION OF THE WEST OF THE SOUTHWEST 1/4 OF CTION 25, TOWNSHIP 40 F THE THIRD PRINCIPAL	16. Additional collateral de	scription:	T'S	0,5,5	
15. Name and address of a RECORD C (if Debtor does not have a record int						
		17. Check only if applicable	_			
		Debtor is a Trust or 18. Check only if applicable	Trustee acting with resp	ect to p	roperty held in trust or	Decedent's Esta
		Debtor is a TRANSMIT				
•			h a Manufactured-Home Tra	ensaction	ı — effective 30 years	
		: :	h a Public-Finance Transact			