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FOLLOW INSTRUCTIONS (front and back) CAREFULLY

4. This FINANCING STATEMENT covers the following collateral:

A. NAME & PHONE OF CONTACT AT FILER [optional] Phone: (800) 331-3282 Fax: (818) 6	62-4141	
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	517037 AZUL BLUE	\neg
UCC Direct Services	6833595	ı
P.O. Box 29071 Glendale, CA 91209-9071	ILIL FIXTURE	ı
	FIXIUNE	



Doc#: 0527812003 Fee: \$30.50 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds Date: 10/05/2005 09:43 AM Pg: 1 of 4

File with: Cook+, IL				ING OFFICE USE ONLY	
DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a. ORGANIZATION'S NAME	1a or 1b) - do not a	bbreviate or combine names			,m
Tb. INDIVIDUAL'S LAST NAME	FIRST NAME JESUS		MIDDLE N	NAME	SUFFIX
SOLORZANO 1c. MAU ING ADDRESS 3729 W. 58TH PLACE	CHICAC	GO	STATE IL	60629	COUNTRY
1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR	1f. JURISDICTIO	N OF ORGANIZATION	1g. ORG.	ANIZATIONAL ID #, if any	NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only on 2a. ORGANIZATION'S NAME	de tor name (2a c	r 2b) - do not abbreviate or c	ombine n	ames	
OR 2b. INDIVIDUAL'S LAST NAME	FIRS T NAME		MIDDLE		SUFFIX
2c. MAILING ADDRESS	CITY	クx.	STATE	POSTAL CODE	COUNTRY
2d. <u>SEE INSTRUCTIONS</u> ADD'L INFO RE ORGANIZATION DEBTOR		ON OF DRIJANIZATION		GANIZATIONAL ID #, if any	NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNAME AZULBLUE INC.	NOR S/P) - insert	only <u>one</u> secured party name	(3a or 30)	
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	1	MIDDLE	NAME	SUFFIX
20 MAILING ADDRESS 1701 S. FIRST AVE	MAYW	OOD	STATE	PC STAL CODE F 3153	COUNTRY

One water condition serial number 77574C & one Reverse Osmosis serial Number 240255. Both completely installed with all attachments

5. ALTERNATIVE DESIGNATION [if applicable] LESSEE/LESSOR	CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING
This FINANCING STATEMENT is to be filed [for record] (or recorded) ESTATE RECORDS. Attach Addendum	in the REAL 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) All Debtors Debtor 1 Debtor 2 If applicable IADDITIONAL FEE!
8. OPTIONAL FILER REFERENCE DATA	00004
6833595	00001

0527812003 Page: 2 of 4

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OLLOW INSTRUCTIONS (front and NAME OF FIRST DEBTOR (1a or			IENT				
9a. ORGANIZATION'S NAME							
96 INDIVIDITAL'S LAST NAME SOLORZANO	JESU		MIDDLE NAME,SUFFIX				
), MISCELLANEOUS		·····					
33595-40-1							
17037 AZUL BLUE							
0001							
ile with: Cook+, IL	20					FILING OFFICE USE	ONLY
1. ADDITIONAL DEBTOR'S EXACT	FULL LECAL NA	ME - insert only <u>one</u> r	ame (11a or 11b) - do not a	abbreviate or combin	e names		
11a. ORGANIZATION'S NAME	4	•		<u> </u>			
11b. INDIVIDUAL'S LAST NAME		Ox	FIRST NAME		MIDDLE N	IAME.	SUFFIX
Ic. MAILING ADDRESS		C	СПҮ		STATE	POSTAL CODE	COUNTRY
d. <u>SEE INSTRUCTION</u> ADD'L IN ORGANI DEBTOR	ZATION	OF ORGANIZATION	11f. JURISDICTION OF ORG	GANIZATION	11g. OR0	GANIZATIONAL ID #,	f any
ADDITIONAL SECURED D							
2. ADDITIONAL SECURED P	'ARTY'S <u>or</u>	ASSIGNOR S/P's N	AME insert only one name	e (12a or 12b)			
12a. ORGANIZATION'S NAME	'ARTY'S <u>or</u> L	ASSIGNOR S/P's N	AME insert only <u>one</u> name	e (12a or 12b)			
12a. ORGANIZATION'S NAME	ARTY'S <u>or</u> L	ASSIGNOR S/P's N	AME insert only <u>one</u> name	e (12a or 12b)	MIDDLE	NAME	SUFFIX
12a. ORGANIZATION'S NAME	ARTY'S <u>or</u>	ASSIGNOR S/P's N	FIRST NAME	e (12a or 12b)			
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME	ARTY'S <u>or</u>	ASSIGNOR S/P's N	00	e (12a or 12b)	MIDDLE I	NAME POSTAL CODE	SUFFIX
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 2c. MAILING ADDRESS			FIRST NAME CITY	C ₂			
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 2c. MAILING ADDRESS 3. This FINANCING STATEMENT covers			FIRST NAME	C ₂			
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 2c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a X fixture	s timber to be co		FIRST NAME CITY	cription:	STATE	POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 2c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a X fixture 4. Description of real estate:	s timber to be co	ut or as-extracted	FIRST NAME CITY	C ₂	STATE	POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 2c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a	timber to be continued in the continued	ut or as-extracted O, JESUS & 9 W 58TH PL	FIRST NAME CITY	cription:	STATE	POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a	timber to be control to the control	ut or as-extracted O, JESUS & 9 W 58TH PL 103 State:	FIRST NAME CITY	cription:	STATE	POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a X fixture 4. Description of real estate: Description: Primary Owner SoloRZANO, ORALIA Site Site City/State/Zip: CHICAG LLINOIS Mail Address: 372 City/State/Zip: CHICAGO/IL	r: SOLORZANG Address: 3725 O/IL/60629-39 9 W 58TH PL /60629-3903 A	ot or as-extracted O, JESUS & 9 W 58TH PL 03 State: Mail ussessor's Parcel	CITY 16. Additional collateral des	cription:	STATE	POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12b. INDIVIDUAL'S LAST NAME 2c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a	timber to be constituted in the constitute of th	ut or as-extracted O, JESUS & 9 W 58TH PL 103 State: Mail Mail Masessor's Parcel ssed Value:	CITY 16. Additional collateral des	cription:	STATE		
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12b. INDIVIDUAL'S LAST NAME 2c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filled as a	r: SOLORZANO A SOLORZANO B Address: 3729 B O/IL/60629-39 B 151-0000 Asses B SINGLE FAM B H (C)	ut or as-extracted O, JESUS & 9 W 58TH PL 103 State: Mail 14 Sssessor's Parcel 15 Ssed Value: 16 SAMPBELLS) ADD	CITY 16. Additional collateral des	cription:	STATE	POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12b. INDIVIDUAL'S LAST NAME 2c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a	r: SOLORZANG Address: 3729 O/IL/60629-39 9 W 58TH PL /60629-3903 A /51-0000 Asset I: SINGLE FAN tion: JAS H (C/ C E 50 FT NW	ut or as-extracted O, JESUS & 9 W 58TH PL 03 State: Mail ussessor's Parcel ussed Value: IILY AMPBELLS) ADD SEC 14-38-13 E FAMILY	CITY 16. Additional collateral des	cription:	STATE	POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a	timber to be controlled to the	ot or as-extracted O, JESUS & 9 W 58TH PL 03 State: Mail assessor's Parcel ssed Value: MILY AMPBELLS) ADI SEC 14-38-13 E FAMILY icipality: COOK	CITY 16. Additional collateral des	cription:	STATE	POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a	r: SOLORZANG Address: 3729 60/IL/60629-39 9 W 58TH PL 60629-3903 A 51-0000 Asset i: SINGLE FAN tion: JAS H (C/	or as-extracted O, JESUS & 9 W 58TH PL 03 State: Mail ssessor's Parcel ssed Value: 4ILY AMPBELLS) ADD SEC 14-38-13 E FAMILY icipality: COOK 1913 sq feet /	CITY 16. Additional collateral des	cription:	STATE	POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a	r: SOLORZANG Address: 3729 O/IL/60629-39 9 W 58TH PL /60629-3903 A /51-0000 Assetion: JAS H (C/C) C E 50 FT NW ription: SINGLE IS County/Mun mber Of Units: s: 1 Lot Size: 3 032 Additions	ot or as-extracted O, JESUS & 9 W 58TH PL 03 State: Mail ssessor's Parcel ssed Value: 4ILY AMPBELLS) ADD SEC 14-38-13 E FAMILY icipality: COOK 1 Bathrooms: 1 1913 sq feet / - Square Feet:	CITY 16. Additional collateral des	cription:	STATE	POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a	timber to be constituted in the constitute of the constitute of above-descriptions. It is a constitute of a constitute of the constitute o	or as-extracted O, JESUS & 9 W 58TH PL 103 State: Mail 103 State: Mail 104 Sec 14-38-13 105 FAMILY 106 icipality: COOK 11 Bathrooms: 1 1913 sq feet / 12 Square Feet: 106 icipal: Assessor's	CITY 16. Additional collateral des	cription:	STATE	POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a	timber to be constituted in the constitute of the constitute of above-descriptions. It is a constitute of a constitute of the constitute o	or as-extracted O, JESUS & 9 W 58TH PL 103 State: Mail 103 State: Mail 104 Sec 14-38-13 105 FAMILY 106 icipality: COOK 11 Bathrooms: 1 1913 sq feet / 12 Square Feet: 106 icipal: Assessor's	FIRST NAME CITY 16. Additional collateral des	e and check only one box	STATE	POSTAL CODE	COUNTRY
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a	timber to be constituted in the constitute of the constitute of above-descriptions. It is a constitute of a constitute of the constitute o	or as-extracted O, JESUS & 9 W 58TH PL 103 State: Mail 103 State: Mail 104 Sec 14-38-13 105 FAMILY 106 icipality: COOK 11 Bathrooms: 1 1913 sq feet / 12 Square Feet: 106 icipal: Assessor's	FIRST NAME CITY 16. Additional collateral des Debtor is a Trust or X	e and check <u>only</u> one box Trustee acting with res	STATE C. pect to pro	POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a	timber to be constituted in the constitute of the constitute of above-descriptions. It is a constitute of a constitute of the constitute o	or as-extracted O, JESUS & 9 W 58TH PL 103 State: Mail 103 State: Mail 104 Sec 14-38-13 105 FAMILY 106 icipality: COOK 11 Bathrooms: 1 1913 sq feet / 12 Square Feet: 106 icipal: Assessor's	17. Check only if applicable Debtor is a Trust or X 18. Check only if applicable Trust or Tr	e and check <u>only</u> one box Trustee acting with res	STATE C. pect to pro	POSTAL CODE	COUNTRY
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS 3. This FINANCING STATEMENT covers collateral or is filed as a	timber to be constituted in the constitute of the constitute of above-descriptions. It is a constitute of a constitute of the constitute o	or as-extracted O, JESUS & 9 W 58TH PL 103 State: Mail 103 State: Mail 104 Sec 14-38-13 105 FAMILY 106 icipality: COOK 11 Bathrooms: 1 1913 sq feet / 12 Square Feet: 106 icipal: Assessor's	17. Check only if applicable Debtor is a Trust or X 18. Check only if applicable Debtor is a TRANSMIT	e and check <u>only</u> one box Trustee acting with res	STATE	POSTAL CODE	COUNTRY or Decedent's Es

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FIN	IANCING STATEMEN	NT ADDENDUM BK) CAREFULLY						
9. NA		ON RELATED FINANCING STATEM	IENT					
	O INDIVIDUAL'S LAST NAME	FIRST NAME JESUS	МІ	DDLE NAME,SUFFIX				
10. N	MISCELLANEOUS							
683	3595-40-1							
517	037 AZUL BLUE							
000	01							
File	with: Cook+, IL	5_			THE ABOVE SPA	ACE IS FOR	R FILING OFFICE USE	ONLY
11. A	ADDITIONAL DEBTOR'S EXACT FU	L LEGAL NAME - insert only one n	ame (11a or 11b) - do not	abbreviate or combi	ne names		
	11a. ORGANIZATION'S NAME							
OR	11b. INDIVIDUAL'S LAST NAME	Ox	FIRS	T NAME		MIDDLE	NAME	SUFFIX
11c.	MAILING ADDRESS	C	CITY			STATE	POSTAL CODE	COUNTRY
11d.	SEE INSTRUCTION ADD'L INFO F ORGANIZATI DEBTOR	1	11f.	JURISDICTION OF OR	GANIZATION	11g. OR	GANIZATIONAL ID#,	fany NONE
12.	ADDITIONAL SECURED PART	'Y'S or ASSIGNOR S/P's N	AME	inser only one nam	ie (12a or 12b)			
12.	12a. ORGANIZATION'S NAME	TO <u>OI</u> ADDICHOROUS STA	W-11		<u> </u>			
OR			LEIDE	ST NAME		IMIDDLE	NAME	SUFFIX
•	12b. INDIVIDUAL'S LAST NAME		Fire	OT NAME		1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
12c.	MAILING ADDRESS		CIT	- 5		STATE	POSTAL CODE	COUNTRY
					(')			
	his FINANCING STATEMENT covers collateral or is filed as a fixture filing	timber to be cut or as-extracted.	16.	Additional collateral de	scription.			
14. [Description of real estate:				1	n		
Par Tof \$2, Per Info Nu Tra Pro SO Na Mo Tra Od: Co	rcel Number/Tax ID: 1914-13 cal: \$15,852.00 Tax Amount: 254.00 Tax Status: Current I rcentage Improvement: 86 T ormation: Last Sale Date: Au mber: 0000613817 Sale Val operty History: Transaction: B OLORZANO, JESUS & SOLO me: MACIAS, EFRAIN Lend ORTGAGE CORP Transfer D onsaction Type: Re-Finance 32746100 1st Loan Amount: nventional Intrest Rate Type aim 2nd Loan Amount: \$0.00	\$2,532.60 Land Total: Improvement: \$13,598.00 ax Rate Area: 72014 Sale igust 21, 1997 Document ue: \$117,000.00 Last Square Feet: \$113.00 Buyer / Borrower: DRZANO, ORALIA Seller er Name: OPTION ONE Date: November 22, 2004 / Equity Document Number: \$65,000.00 Loan Type: E: Variable Deed Type: Quit						
15.	Name and address of a RECORD OWNER (if Debtor does not have a record interes							
				Check only if applicable btor is a Trust or	e and check <u>only</u> one bo		perty held in trust	or Decedent's Estate
			18.	Check only if applicable	e and check only one bo)X.		
				Debtor is a TRANSMI	TTING UTILITY th a Manufactured-Home	a Trancactic	on effective 30 vears	
			-		th a Manufactured-Horn th a Public-Finance Trai			

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FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATI	EMENT		
9a. ORGANIZATION'S NAME			
OR SOLORZANO SI AST NAME JESUS	MIDDLE NAME, SUFFIX		
10. MISCELLANEOUS			
6833595-40-1			
517037 AZUL BLUE			
00001			
File with: Cook+, IL	THE AB	OVE SPACE IS FOR FILING OFFICE USE	ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL L.C NAME - insert only one	e name (11a or 11b) - do not abbreviate o	r combine names	·····
11a. ORGANIZATION'S NAME			
OR 11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
11c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
11d. SEE INSTRUCTION ADD'L INFO RE ORGANIZATION DEBTOR	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID#,	if any
	NAME insert only one name (12a or 12	b)	
12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P's 12a. ORGANIZATION'S NAME	NAME TISER Only One hame (12a of 12)		
OR		MIDDLE NAME	SUFFIX
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	INIDDEE IAVINE	OGI 1 W
12c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
	(')		
13. This FINANCING STATEMENT covers timber to be cut or as-extracte	d 16. Additional collateral description:		
collateral or is filed as a fixture filing.		4,	
14. Description of real estate:		'S -	
Borrower: SOLORZANO, JESUS & SOLORZANO, ORALI Lender Name: NEIGHBORHOOD SVC Title Company: CHICAGO TITLE Transfer Date: May 6, 1999 Transaction Type: Re-Finance / Equity Document Number: 009943828 1st Loan Amount: \$10,000.00 Loan Type: Conventional Intrest Rate Type: Fixed 2nd Loan Amount: \$0.00. Parcel ID: 1914-130-051-0000	36	OFFICO	
15. 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 and check on Debtor is a Trust or Trustee actin		or Decedent's Estate
	18. Check only if applicable and check on	··· <u>·</u>	
	Debtor is a TRANSMITTING UTILITY		
	Filed in connection with a Manufactur	red-Home Transaction effective 30 years	
	Filed in connection with a Public-Fina	ance Transaction effective 30 years	10