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Doc#: 0625416044 Fee: \$28.50
Eugene "Gene" Moore RHSP Fee:\$10.00
Cook County Recorder of Deeds
Date: 09/11/2006 10:24 AM Pg: 1 of 3

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
Diligenz, Inc. 1-800-858-5294
B. SEND ACKNOWLEDGMENT TO: (Name and Address)
21584653
Prepared by:
Diligenz, Inc.
6500 Harbour Heights Pkwy, Suite 400
Mukilteo, WA 98275
Filed In: Illinois Cook

THE ABOVE SPACE IS FOR 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
1a. ORGANIZATION'S NAME
Lastrada, Inc.
OR
1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX
1c. MAILING ADDRESS
2380 Lakewood Blvd. Hoffman Estates IL 60195 USA
1d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION Corp. 1f. JURISDICTION OF ORGANIZATION IL 1g. ORGANIZATIONAL ID #, if any 52487382 NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names
2a. ORGANIZATION'S NAME
OR
2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX
2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
2d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)
3a. ORGANIZATION'S NAME
ALLIANCE FUNDING GROUP, INC.
OR
3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX
3c. MAILING ADDRESS
2099 S. STATE COLLEGE, SUITE 100 ANAHEIM CA 92806 USA

4. This FINANCING STATEMENT covers the following collateral:
"All equipment, general intangibles and all modifications and attachments thereto and replacements therefore now and hereafter covered by the Equipment Lease Agreement dated as of 08/10/06 between Alliance Funding Group, Inc. as Lessor and Lastrada, Inc. as Lessee and all additional commitments related thereto."

5. ALTERNATIVE DESIGNATION (if applicable): LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING
6. [X] This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional) All Debtors Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA
5268 21584653

Handwritten initials: SC, MW, 3/20, JH

**UNOFFICIAL COPY****UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

<b>9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT</b>			
8a. ORGANIZATION'S NAME			
Lastrada, Inc.			
OR	9b. INDIVIDUAL'S LAST NAME		MIDDLE NAME, SUFFIX
	FIRST NAME		

10. MISCELLANEOUS:

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<b>11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names</b>					
11a. ORGANIZATION'S NAME					
OR	11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
11c. MAILING ADDRESS			CITY	STATE	POSTAL CODE
					COUNTRY
11d. TAX ID #	SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if any
					<input type="checkbox"/> NONE

<b>12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)</b>					
12a. ORGANIZATION'S NAME					
OR	12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	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:

Please see attachment for full legal land description.

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

Ram Land Investments, LLC 2380 Lakewood Blvd.  
Hoffman Estates, IL 60195

16. Additional collateral description:

17. Check only if applicable and check only one box.

Debtor is a  Trust or  Trustee acting with respect to property held in trust or  Decedent's Estate

18. Check only if applicable and check only one box.

 Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction — effective 30 years Filed in connection with a Public-Finance Transaction — effective 30 years

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P.03/08

FRAN. LASTRADA

FEB 18 . 15125552215

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PIN 102008

## PLAT OF EASEMENT

**LEGAL DESCRIPTION:**  
 THAT PART OF LOT 9 IN FOUNTAIN CROSSING OF HORTON ESTATES AS RECORDED ON MAY 20TH, 2003, AS DOCUMENT NUMBER 051480313 IN THE NORTHEAST QUARTER OF SECTION 36, TOWNSHIP 42 NORTH, RANGE 4 EAST OF THE 10TH MERIDIAN NEARLY AS DESCRIBED AS FOLLOWS:  
 COMMENCING AT THE NORTH EAST CORNER OF LOT 9 OF THE RESUBDIVISION OF LOT # 9 OF FOUNTAIN CROSSING OF HORTON ESTATES AS RECORDED ON JANUARY 26, 2003 AS DOCUMENT NUMBER 050204150; THENCE NORTH 88 DEGREES 00 MINUTES 35.1 MINUTES WEST 250.00 FEET ALONG THE NORTHERLY LINE OF LOT 9A; SAID LINE ALSO BEING THE SOUTHERLY LINE OF SAID LOT 9 TO THE POINT OF BEGINNING OF THE EASEMENT HEREIN TO BE DESCRIBED; THENCE NORTH 34 DEGREES 48 MINUTES 00 SECONDS EAST 46.00 FEET TO A POINT ON THE NORTHERLY LINE OF SAID LOT 9; THENCE NORTH 45 DEGREES 20 MINUTES 46 SECONDS WEST 15.00 FEET ALONG THE NORTHERLY LINE OF SAID LOT 9; THENCE SOUTH 88 DEGREES 00 MINUTES 35.1 SECONDS EAST 20 FEET TO A POINT ON THE SOUTHERLY LINE OF SAID LOT 9; THENCE SOUTH 88 DEGREES 00 MINUTES 35.1 SECONDS EAST 45 SECONDS EAST ALONG THE SOUTHERLY LINE OF SAID LOT 9 TO THE POINT OF BEGINNING IN COOK COUNTY, ILLINOIS.



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