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)

UCC Direct Services
P.O. Box 29071
Glendale, CA 91209-9071

File with: CC II Cook+

Doc#: 0720706146 Fee: \$30.50 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds Date: 07/26/2007 02:01 PM Pg: 1 of 4

			CC IL Cook+, IE	~/ /		ILING OFFICE USE ONLY	
1. DI	EBTOR'S EXACT FULI	L LEGAL ANE -	insert only one debtor name (1:	a or 1b) - do not abbreviate or comb	ine names		
	1a. ORGANIZATION'S NA MIDWEST C	ORE & C.	TALYTICS, LLC				
OR !	1b. INDIVIDUAL'S LAST N	NAME	TY_	FIRST NAME	MIDDLE		SUFFIX
16 M	N. 9TH AVE.		Ox	MAYWOOD	STATE IL	POSTAL CODE 60153	USA
1d. <u>S</u>	EE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZA (10N	1f. JURISDICTION OF ORGANIZATIO		GANIZATIONAL ID #, if any 276018	NONE
2. A	DDITIONAL DEBTOR'S	S EXACT FULL L	EGAL NAME - insert only one	eutor name (2a or 2b) - do not abbr	eviate or combine	names	
	2a. ORGANIZATION'S NA			4			
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY	
2d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR			2f. JURISDICTION OF C (G/.NIZATIO		GANIZATIONAL ID #, if any	NONE	
3. S			TOTAL ASSIGNEE of ASSIGN	OR S/P) - insert only one secure 1 p	artv .iame (3a or 3	(b)	
	3a ORGANIZATION'S NA BANKFINAN		.B.		(O)		
OR	3b. INDIVIDUAL'S LAST I	NAME		FIRST NAME	MIDDL	E NAME	SUFFIX
3c MAIL ING ADDRESS 15W060 NORTH FRONTAGE ROAD			BURR RIDGE	STATE IL	POSTAL CODE 60527	USA	

4. This FINANCING STATEMENT covers the following collateral:

15-11-132-005-0000; 15-11-132-006-0000; 15-11-132-007-0000 and 15-11-132-031-0000: Security Agreement dated July 18, 100 covering all business assets and personal property (including, but not limited to, all inventory, equipment, accounts, instruments, documents, chattel paper, investment property and general intangibles; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds), and all other assets of Borrower(s).

5. ALTERNATIVE DESIGNATION [if applicable]	LESSEE/LESSOR CONSIGNEE/CON		AG. LIEN NON-UCC FILING
This FINANCING STATEMENT is to be filed ESTATE RECORDS. Attach Addendum		Check to REQUEST SEARCH REPORT(S) on Debtor(s) ADDITIONAL FEE! Ioptional	Ali Debtors Debtor 1 Debtor 2
B. OPTIONAL FILER REFERENCE DATA			u
11674832	Candy Logiurato	303-1902020573	Ч

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FINANCING STATEMENT A FOLLOW INSTRUCTIONS (front and back) CARE	DDENDUM			^		
NAME OF FIRST DEBTOR (1a or 1b) ON REL						
9a. ORGANIZATION'S NAME MIDWEST CORE & CATA	LYTICS. LLC					
)R L	ST NAME	MIDDLE NAME, SUFFIX				
0. MISCELLANEOUS						
1674832-IL-31						
5715 BANK FINANCIAL						
Candy Logiurato		1				
03-1902020573						
ile with: CC IL Cook+, IL			THE ABOVE SPACE	E IS FOR FI	LING OFFICE USE	ONLY
1. ADDITIONAL DEBTOR'S EXACT FULL LFCA	NAME - insert only <u>one</u> na	ame (11a or 11b) - do not	abbreviate or combine	names		
11a. ORGANIZATION'S NAME	1					
11b. INDIVIDUAL'S LAST NAME	0.5	FIRST NAME	М	IIDDLE NAM	ΛE	SUFFIX
		OLTY.		TATE TE	OSTAL CODE	COUNTRY
1c. MAILING ADDRESS	C	CITY	3	TATE PO	JSTAL CODE	COUNTRY
	TYPE OF ORGANIZATION	11f. JURISDICTION OF ORG	GANIZATION 1	1g. ORGAN	NIZATIONAL ID#, if	any
ORGANIZATION DEBTOR		4				NON
ADDITIONAL SECURED PARTY'S or	ASSIGNOR S/P's NA	ME - i. sert only one nam	e (12a or 12b)			·
12a. ORGANIZATION'S NAME		0,				
R 12b. INDIVIDUAL'S LAST NAME		FIRST NAME	IM	IIDDLE NAM	WE	SUFFIX
125. MOIVIDORE O ENOT MANIE			5			1
2c. MAILING ADDRESS		CITY	s	TATE PO	OSTAL CODE	COUNTRY
			()			
	o be cut or as-extracted	16. Additional collateral des	cription:			
collateral or is filed as a X fixture filing.			4			
4. Description of real estate:			,	\mathcal{U}^{-}		
Description: Property Address: 15 N.),	
L 60153 PIN #15-11-132-005-0000; 1 5-11-132-007-0000 and 15-11-132-00	31-0000: PARCEL 1:					
LOT 8 TO 15 INCLUSIVE IN CHARLE SUBDIVISION OF THE WEST 1/2 OF					· C	
MAYWOOD, A SUBDIVISION IN SEC	TION 2, 11 AND 14,				-(0)	
'OWNSHIP 39 NORTH, RANGE 12 E. PRINCIPAL MERIDIAN, IN COOK COI	UNTY, ILLINOIS.					
PARCEL 2: LOT 6 (EXCEPT THAT PA FOLLOWS: BEGINNING AT THE NO	ART DESCRIBED AS RTHEASTERI Y					
CORNER OF SAID LOT 6; THENCE N	IORTHWESTERLY					
LONG THE NORTHERLY LINE OF S EET TO A POINT OF CURVE HAVIN	IG A RADIUS OF 20					
EET; THENCE SOUTHEASTERLY A INE, TANGENT TO LAST DESCRIBE						
5. Name and address of a RECORD OWNER of above-o						
(if Debtor does not have a record interest):						
		17. Check only if applicable				
			Trustee acting with respect	to property	held in trust or	Decedent's Estate
		18. Check only if applicable Debtor is a TRANSMIT				
			a Manufactured-Home Trai	nsaction e	effective 30 years	
		Filed in connection with	a Public-Finance Transacti	ion – effecti	ve 30 years	

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FINANCING STATEMEN FOLLOW INSTRUCTIONS (front and bac			.*			
9. NAME OF FIRST DEBTOR (1a or 1b) C		MENT				
MIDWEST CORE & C.		ANDRES MANS OUTEN				
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
40. MISCELLANEOUS						
11674832-IL-31						
15715 BANK FINANCIAL						
Candy Logiurato		į				
303-1902020573						
File with: CC IL Cook+, IL	Ď		THE ABOVE SP	ACE IS FO	R FILING OFFICE USE	ONLY
11. ADDITIONAL DEBTOR'S EXACT FUL	L (ECA' NAME - insert only one	name (11a or 11b) - do not	abbreviate or combi	ne names		
OR	9					
11b. INDIVIDUAL'S LAST NAME	Ox	FIRST NAME		MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS	C	CITY		STATE	POSTAL CODE	COUNTRY
11d. <u>SEE INSTRUCTION</u> ADD'L INFO RE ORGANIZATIO DEBTOR		11f. JURISDICTION OF ORG	GANIZATION	11g. OR	L Ganizational ID#, if	any NONE
12. ADDITIONAL SECURED PARTY 12a. ORGANIZATION'S NAME	"S or ASSIGNOR S/P's N	IAME - i isert only <u>one</u> name	e (12a or 12b)			
		0,				
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
			()			
13. This FINANCING STATEMENT covers collateral or is filed as a fixture filing.	timber to be cut or as-extracted	16. Additional collateral desc	cription:			
14. Description of real estate:			1	Ô		
TO THE NORTH A CHORD DIST INTERSECTIONS OF SAID CUR SOUTH LINE OF LOT 6, 6,40 FE BEGINNING) IN WILSON'S RES WEST 1/2 OF BLOCK 198 IN MA11, TOWNSHIP 39 NORTH, RANTHIRD PRINCIPAL MERIDIAN, I ILLINOIS. PARCEL 3: LOT 7 (E LOT 7 HEREINAFTER DESCRIB BEGINNING AT A POINT 14.67 I NORTHEAST CORNER LOT 7, I DESCRIBED, SAID POINT BEIN CURVE, HAVING A RADIUS OF NORTHWESTERLY ALONG A CTO THE LAST DESCRIBED LINE	EVED LINE WITH THE EET TO A POINT OF UBDIVISION OF THE AYWOOD, IN SECTION NGE 12 EAST OF THE N COOK COUNTY, XCEPT THAT PART OF BED AS FOLLOWS: FEET SOUTH OF THE HEREINAFTER G THE POINT OF 20 FEET; THENCE URVED LINE, TANGENT					
15. Name and address of a RECORD OWNER of (if Debtor does not have a record interest):						
		17. Check only if applicable a Debtor is a Trust or 18. Check only if applicable a Debtor is a TRANSMITT: Filed in connection with a	Trustee acting with resp and check <u>only</u> one box. ING UTILITY a Manufactured-Home T	ect to prope	effective 30 years	Decedent's Estate

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FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY		*		•	
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATES	MENT				
9a. ORGANIZATION'S NAME MIDWEST CORE & CATALYTICS, LLC					
9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS	4				
11674832-IL-31					
15715 BANK FINANCIAL					
Candy Logiurato					
303-1902020573					
File with: CC IL Cook+, IL		THE ABOVE SPA	CE IS FO	R FILING OFFICE USE O	NLY
11. ADDITIONAL DEBTOR'S EXACT FULL FGA: NAME - insert only one n	ame (11a or 11b) - do not	abbreviate or combin	e names		
11a. ORGANIZATION'S NAME					
OR 11b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS	СІТУ		STATE	POSTAL CODE	COUNTRY
11d. SEE INSTRUCTION ADD'L INFO RE ORGANIZATION DEBTOR	11f JURISDICTION OF ORG	SANIZATION	11g. OR	GANIZATIONAL ID#, if a	NONE
12 ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P's NA	AME - I sert only one name	e (12a or 12h)		· · · · · · · · · · · · · · · · · · ·	
12a. ORGANIZATION'S NAME	0.	(1-0)			
OR	<u> </u>				
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	16. Additional collateral desc	cription:	<u> </u>	<u>].</u>	
collateral or is filed as a fixture filing.		1//			
14. Description of real estate:		*	0		
NORTH, A CHORD DISTANCE OF 16 FEET TO THE			9		
INTERSECTION OF SAID CURVED LINE WITH THE				Jx	
NORTH LINE OF SAID LOT 7; THENCE EAST ALONG					
THE NORTH LINE OF SAID LOT 7 6.40 FEET TO THE NORTHEAST CORNER OF SAID LOT 7; THENCE SOUTH				'C	
ALONG THE EAST LINE OF SAID LOT 7, 14.67 FEET TO				()	
THE PLACE OF BEGINNING) IN WILSON'S RESUBDIVISION OF THE WEST 1/2 OF BLOCK 198 IN					
MAYWOOD, A SUBDIVISION OF SECTION 11 AND THE					
NORTHWEST 1/4 OF SECTION 14, TOWNSHIP 39 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL					
MERIDIAN, IN COOK COUNTY, ILLINOIS. Parcel ID:					
15-11-132-005-0000; 15-11-132-006-0000; 15-11-132-007-0000 and 15-11-132-031-0000;					
15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest);					
				- ·	
	17. Check <u>only</u> if applicable a Debtor is a Trust or	ind check <u>only</u> one box. Frustee acting with respe	et to pror	arty hold in trust	Docado-#- F
	18. Check only if applicable a		or to blobe	erty held in trust or	Decedent's Estate
	l 				
		is a TRANSMITTING UTILITY connection with a Manufactured-Home Transaction – effective 30 years			
	Filed in connection with a			•	