

## 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) 15237 OLD SECOND NAT **UCC Direct Services** 12048209 P.O. Box 29071 Glendale, CA 91209-9071 File with: CC IL Cook

Doc#: 0725303118 Fee: \$26.50 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds Date: 09/10/2007 11:39 AM Pg: 1 of 2

DEBTOR'S EXACT FULL LECAL NAME - insert only one_debtor name     Tall ORGANIZATION'S NAME	THE ABOVE S	PACE IS FOR FILING OFFICE USE ONLY	
ALPACA PROPERTIES, LLC	(1a or 1b) - do not abbreviate or combine na	emes	
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 2012 W MADDON #1  1d. SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORGANIZATION	СНІСАGO	STATE POSTAL CODE 1L 60622	COUNTRY
ORGANIZATION DEBTOR'S EXACT FULL LEGAL NAME - insert only one of the control of t	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any 02311208	Non
	octor name (2a or 2b) - do not abbreviate o	or combine names	
OR 2b. INDIVIDUAL'S LAST NAME	FIRS T NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS	СПУ	STATE POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF GREATIZATION	2g. ORGANIZATIONAL ID #, if any	
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNO OLD SECOND NATIONAL BANK	R S/P) - insert only one secured party name	ne (3a or 3b)	NONE
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MID DE NAME	
37 SOUTH RIVER	AURORA	STATE POS ALCODE	SUFFIX
This FINANCING STATEMENT covers the following collateral:	TOTOTA	IL 60506-4172	ÜŜÃ

ALL FIXTURES AND FURNITURE INCLUDING, BUT NOT LIMITED TO, THE FIXTURES AND FURNITURE LOCATED OR TO BE LOCATED ON THE REAL PROPERTY DESCRIBED ON THE ATTACHED UCC FINANCING STATEMENT ADDENDUM HEREOF AND INCORPORATED BY THIS REFERENCE. Parcel ID: 16-02-121-007-0000

5. ALTERNATIVE DESIGNATION [if applicable] LE 6. [X] This FINANCING STATEMENT is to be filed ffor ESTATE RECORDS. Attach Addendum 8. OPTIONAL FILER REFERENCE DATA 12048209		NOR BAILEE/BAILOR SELLER/BU to REQUEST SEARCH REPORT(S) on Debtor(S TIONAL FEE) (gotional)	YER AG. LIEN NON-UCC FILING  All Debtors Debtor 1 Debtor 2
FILING OFFICE COPY - NATIONAL LICC FINANCE	60901001416	089	<u> </u>

0725303118 Page: 2 of 2

## UNOFFICIAL CO

9. NAME OF FIRST DEBTOR (1a or 1b	ON RELATED FINANCING STAT	EMENT				
94 ORGANIZATIONS NAME ALPACA PROPERTI		LIVICINI	] 			
9b. INDIVIDUAL'S LAST NAME						
Y	FIRST NAME	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS	<del></del>					
12048209-IL-31						
15237 OLD SECOND NAT		ļ				
60901001416						
OS9						
File with: CC IL Cook+, IL		i			•	
11. ADDITIONAL DESTOR'S EXACT FUI	A CAL MANE		THE ABOVE S	PACE IS F	OR FILING OFFICE US	E ONL V
11. ADDITIONAL DEBTOR'S EXACT FUI	LLEF GAL NAME - insert only one	name (11a or 11b) - do not ab	breviate or combi	ne names		LONET
OR						
11b. INDIVIDUAL'S LAST NAME	0.0	FIRST NAME		MIDDLE	NAME	
11c. MAILING ADDRESS				MIDDEL	NAME	SUFFIX
	(,	CITY		STATE	POSTAL CODE	COUNTRY
1d. SEE INSTRUCTION ADD'L INFO R	E 11e. TYPE OF ORGANIZATION	11f HUDISDICTION OF CO.				
ORGANIZATIO DEBTOR	ON .	11f. JURISDICTION OF ORGA	NIZATION	11g. OR	GANIZATIONAL ID#, if	any
2 ADDITIONAL SECURED PARTY						□ NO
12a, ORGANIZATION'S NAME	S OF ASSIGNOR S/P's N	AME insert only one_name (	12a or 12b)			
R		0/				
12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	IALAT.	
2c. MAILING ADDRESS		(1)		IMODELI	VAIVIE	SUFFIX
		CITY		STATE	POSTAL CODE	COUNTRY
. This FINANCING STATEMENT covers					l.	
collateral or is filed as a X fixture filing.	timber to be cut or as-extracted	16. Additional collateral descripti	on:			
. Description of real estate:			4			
			,	S		
escription: ADDRESS: 1341 N *60651 PIN NO.: 16-02-121-007 DUTH 1/2 OF LOT 42 IN RECO	LAWNDALE, CHICAGO					
					/Sc.	
4 OF SECTION 2 TOWNSHIP	OF THE NORTHWEST				10	
XCEPT 5 ACRES IN THE NORTH SEREOF), IN COOK COUNTY, I	HEAST CORNER				0	
-02-121-007-0000	LLINOIS. Parcel ID:					
Name and address of a RECORD OWNER.						
lame and address of a RECORD OWNER of ab (if Debtor does not have a record interest):	ove-described real estate		4			
	1	7. Check only if applicable and che				
	·		e acting with respect	to property	held in trust or [	Decedent's Estate
	\r'-	8. Check only if applicable and che				
	F	Deptor is a TRANSMITTING UT Filed in connection with a Manu	TILITY			