

UNOFFICIAL COPY

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY



Doc#: 0726033007 Fee: \$30.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 09/17/2007 07:11 AM Pg: 1 of 4

A. NAME & PHONE OF CONTACT AT FILER [optional]
GALETE J. LEVIN (212) 732-2000

B. SEND ACKNOWLEDGMENT TO: (Name and Address)
CULLEN AND DYKMAN LLP
44 WALL STREET -19TH FLOOR
NEW YORK, NEW YORK 10005

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

8392473
D2 MS

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

79TH AND WOLCOTT, LLC

OR

1b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

1c. MAILING ADDRESS

10032 S. WESTERN AVENUE

CITY

CHICAGO

STATE

IL

POSTAL CODE

60643

COUNTRY

USA

1d. SEE INSTRUCTIONS

ADD'L INFO RE ORGANIZATION DEBTOR

1e. TYPE OF ORGANIZATION

LIM. LIAB. CO.

1f. JURISDICTION OF ORGANIZATION

ILLINOIS

1g. ORGANIZATIONAL ID #, if any

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

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

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

FANNIE MAE

OR

3b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

3c. MAILING ADDRESS

3900 WISCONSIN AVENUE N W

CITY

WASHINGTON

STATE

DC

POSTAL CODE

COUNTRY

USA

4. This FINANCING STATEMENT covers the following collateral:

All articles of personal property attached to or used in any way in connection with the operation or renting of the premises described on the attached Addendum ("Premises"), including, but not limiting the generality of the foregoing to, all partitions, elevators, engines, motors, dynamos, boilers, furnaces, fuel oil, coal; heating, refrigerating, air conditioning, plumbing, gas and electric light equipment; vacuum cleaning systems; sprinkler system or other fire preventing or extinguishing equipment and materials; stoves, ranges, refrigerators, washing machines, clothes dryers, dishwashers, refuse compactors, saunas, awnings, screens, window shades; furniture and furnishings for the common halls and lobbies; furnishings and equipment of any hotel, motel, resort, health spa, restaurant, recreation facility, hospital, nursing home, adult residence or other health care related facility, theater, place of public or private assemblage, club and lodge, constituting all or part of the Premises; also all other articles constituting a part of or used in connection with the operation of the buildings and other structures situated upon and constituting part of the Premises, and all buildings, structures, improvements, fixtures and articles of personal property at any time, now or hereafter, constructed, affixed to or placed upon said Premises or used in connection with the operation thereof.

5. ALTERNATIVE DESIGNATIONS (if applicable):
 LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed (for record) in the REAL ESTATE RECORDS Attach Addendum (if applicable)
7. Check to REQUEST SEARCH REPORTS ON Debtors (optional)
 ALL DEBTORS DEBTOR 1 DEBTOR 2

8. OPTIONAL FILER REFERENCE DATA GJL 09/07/07 Chicago Title Insurance Company

File Number D07-0723 Loan Number 7209849

File in Cook County

UNOFFICIAL COPY**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] GALETE J. LEVIN (212) 732-2000				
B. SEND ACKNOWLEDGMENT TO: (Name and Address) CULLEN AND DYKMAN LLP 44 WALL STREET -19TH FLOOR NEW YORK, NEW YORK 10005				

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> debtor name (1a or 1b) - do not abbreviate or combine names					
OR	1a. ORGANIZATION'S NAME 79TH AND WOLCOTT, LLC				
	1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 10032 S. WESTERN AVENUE		CITY CHICAGO	STATE IL	POSTAL CODE 60643	COUNTRY USA
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION LIM. LIAB. CO.	1f. JURISDICTION OF ORGANIZATION ILLINOIS	1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE	
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> debtor name (2a or 2b) - do not abbreviate or combine names					
OR	2a. ORGANIZATION'S NAME				
	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	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE	
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only <u>one</u> secured party name (3a or 3b)					
OR	3a. ORGANIZATION'S NAME FANNIE MAE				
	3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 3900 WISCONSIN AVENUE N W		CITY WASHINGTON	STATE DC	POSTAL CODE	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

All articles of personal property attached to or used in any way in connection with the operation or renting of the premises known as **7951-7953 S. Wolcott Avenue, Chicago, Illinois 60620** ("Premises") including but not limiting the generality of the foregoing to, all partitions, elevators, engines, motors, dynamos, boilers, furnaces, fuel oil, coal; heating, refrigerating, air conditioning, plumbing, gas and electric light equipment; vacuum cleaning systems; sprinkler system or other fire preventing or extinguishing equipment and materials; stoves, ranges, refrigerators, washing machines, clothes dryers, dishwashers, refuse compactors, saunas, awnings, screens, window shades; furniture and furnishings for the common halls and lobbies; furnishings and equipment of any hotel, motel, resort, health spa, restaurant, recreation facility, hospital, nursing home, adult residence or other health care related facility, theater, place of public or private assemblage, club and lodge, constituting all or part of the Premises; also all other articles constituting a part of or used in connection with the operation of the buildings and other structures situated upon and constituting part of the Premises, and all buildings, structures, improvements, fixtures and articles of personal property at any time, now or hereafter, constructed, affixed to or placed upon said Premises or used in connection with the operation thereof.

5. ALTERNATIVE DESIGNATIONS (if applicable):	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6.	This FINANCING STATEMENT is to be filed (for record) in the REAL ESTATE RECORDS Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORTS ON Debtors [ADDITIONAL FEE] (optional)	ALL DEBTORS	DEBTOR 1	DEBTOR 2	

8. OPTIONAL FILER REFERENCE DATA GJL 09/07/07 Chicago Title Insurance Company

File Number D07-0723 Loan Number 7209849

File in Illinois State

UNOFFICIAL COPY**UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME

79TH AND WOLCOTT, LLC

OR

9b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor (11a or 11b) - do not abbreviate or 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 INSTRUCTIONS**ADD'L INFO RE
ORGANIZATION
DEBTOR

11e. TYPE OF ORGANIZATION

11f. JURISDICTION OF ORGANIZATION

11g. ORGANIZATIONAL ID #, if any

 NONE12. ADDITIONAL SECURED PARTY'S or

ASSIGNOR S/P/S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME

SOVEREIGN BANK

OR

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

12c. MAILING ADDRESS

195 MONTAGUE STREET

CITY

BROOKLYN

STATE

NY

POSTAL CODE

11201

COUNTRY

USA

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:

PREM: 7951-7953 S. WOLCOTT AVENUE
 TOWN: CHICAGO, ILLINOIS 60620
 COUNTY: COOK
 Premises ID No.: 20-31-202-019-0000

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

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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Schedule "B"

All that certain plot, piece, or parcel of land with the buildings and improvements thereon erected, situate, lying, and being in the City of Chicago, County of Cook, State of Illinois, said plot of land being more particularly bounded and described as follows:

LOT 25 (EXCEPT THE NORTH 10 FEET THEREOF) AND ALL OF LOT 26 IN BLOCK 2 IN BAIRD AND ROWLAND'S SUBDIVISION OF THE WEST 1/2 OF THE NORTHEAST 1/4 OF SECTION 31, TOWNSHIP 38 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

TOGETHER with all right, title and interest of, in and to any streets and roads abutting the above described premises.

SAID PREMISES being known as and by the street number 7951-7953 S. Wolcott Avenue, Chicago, Illinois 60620.

Premises: 7951-7953 S. Wolcott Avenue
Chicago, Illinois 60620

Perm Tax #: 20-31-202-019-0000

County: Cook

Prepared by, and
Record and Return To:

Cullen and Dykman LLP
44 Wall Street, 19th Floor
New York, New York 10005

ATT: Galette J. Levin