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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

Doc#: 0935234024 Fee: \$40.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 12/18/2009 09:02 AM Pg: 1 of 3

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141	
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	14663 MERCHANTS & MA
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	21320073 IL IL FIXTURE

File with: CC IL Cook+, IL

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 BATHHAUS, LTD.					
OR	1b. INDIVIDUAL'S LAST NAME				
1c. MAILING ADDRESS 860 S. NORTHWEST HIGHWAY		CITY BARRINGTON	STATE IL	POSTAL CODE 60010	COUNTRY USA
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION CORPORATION	1f. JURISDICTION OF ORGANIZATION IL	1g. ORGANIZATIONAL ID #, if any 55057206 <input type="checkbox"/> 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 NORTH STAR TRUST COMPANY, SUCCESSOR TO FIRST NATIONAL BANK OF *					
OR	2b. INDIVIDUAL'S LAST NAME				
2c. MAILING ADDRESS 500 W. MADISON ST., SUITE 3150		CITY CHICAGO	STATE IL	POSTAL CODE 60661	COUNTRY USA
2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION CORPORATION	2f. JURISDICTION OF ORGANIZATION IL	2g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> 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 MERCHANTS AND MANUFACTURERS BANK					
OR	3b. INDIVIDUAL'S LAST NAME				
3c. MAILING ADDRESS 601 E. CASS ST		CITY JOLIET	STATE IL	POSTAL CODE 60432	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

PIN: 01-01-211-034-0000 VOL. 001 AND 01-01-211-029-0000 VOL. 001, ALL EQUIPMENT, FIXTURES; INVENTORY; ACCOUNTS; INSTRUMENTS; CHATTEL PAPER; 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; ALL PROCEEDS RELATING TO ANY OF THE FOREGOING (INCLUDING INSURANCE, GENERAL INTANGIBLES AND ACCOUNTS PROCEEDS).

5. ALTERNATIVE DESIGNATION (if applicable)	<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAIOLR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input checked="" type="checkbox"/> 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) (optional)		<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2	
8. OPTIONAL FILER REFERENCE DATA						

21320073

BATHHAUS, LTD

E
S-7
M-NO
P-3
S-M
SC
HJ

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FINANCING STATEMENT ADDENDUM

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

9a. ORGANIZATION'S NAME		
OR		
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS

21320073-IL-31

14663 MERCHANTS & M.A.

File with: CC IL Cook+, IL EATPHHAUS, LTD

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME			
BARRINGTON, AS TRUSTEE UNDER TRUST AGREEMENT DATED AUGUST 31, 1959, *			
OR			
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
11c. MAILING ADDRESS		CITY	STATE
500 W. MADISON ST., SUITE 3150		CHICAGO	IL
		POSTAL CODE	COUNTRY
		60661	
11d. SEE INSTRUCTION	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION
		CORPORATION	IL
			11g. ORGANIZATIONAL ID #, if any
			<input checked="" type="checkbox"/> NONE

12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P's NAME - insert only one name (12a or 12b)

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.

16. Additional collateral description:

14. Description of real estate:

Description: LOTS 10, 11 AND THE EAST 1/2 OF LOT 12 (EXCEPT THE WEST 10 FEET OF THE EAST 1/2 OF LOT 12) IN BLOCK 6, IN ARTHUR T. MCINTOSH AND COMPANY'S MAIN STREET ADDITION TO BARRINGTON, A SUBDIVISION OF PART OF LOT 2 IN COUNTY CLERK'S DIVISION OF THE NORTHEAST 1/4 OF SECTION 1, TOWNSHIP 42 NORTH, RANGE 9 EAST OF THE THIRD PRINCIPAL MERIDIAN, (EXCEPT THEREFROM THE FEE SIMPLE TITLE THEREOF TO THAT PART THEREOF VESTED IN THE STATE OF ILLINOIS, BY DECREE ENTERED MAY 16, 2001, CASE NO. 01L 50043) IN COOK COUNTY, ILLINOIS. Parcel ID: 01-01-211-034-0000 VOL. 001 AND 01-01-211-029-0000 VOL. 001

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 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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11a. ORGANIZATION'S NAME AND KNOWN AS TRUST NUMBER 11-0005			
OR			
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
11c. MAILING ADDRESS 500 W. MADISON ST., SUITE 3150		CITY CHICAGO	STATE POSTAL CODE COUNTRY IL 60661
11d. SEE INSTRUCTION	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION CORPORATION	11f. JURISDICTION OF ORGANIZATION IL
			11g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> NONE

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