44000 STORESTANDER COPY

(7-8-10)



UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Belmont Bank & Trust Company 8250 West Belmont Avenue Chicago, IL 60634 Doc#: 1019547129 Fee: \$40.00 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds Date: 07/14/2010 02:06 PM Pg: 1 of 3

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL I GA' NAME - insert of	nly one debtor name (1a or 1b) -	do not abbreviate or combine names			
1s ORGANIZATION'S NAME					
DOLYVA PROPERTIES, LLO	C - 1517 N. ROCK	CWELL ST.			
OR 1b. INDIVIDUAL'S LAST NAME	FIR	ST NAME	MIDDLE	NAME	SUFFIX
ID. HADALO DIGITALINE			-		
	CIT	·	STATE	TPOSTAL CODE	COUNTRY
1c. MAILING ADDRESS	***		IL	60641	USA
2847 N PULASKI RD, #CS		HICAGO	1		
1d. SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPI	OF OF GANIZATION 1f.	JURISDICTION OF ORGANIZATION	1 "	1g. ORGANIZATIONAL ID #, if any	
ORGANIZATION LLC		Ĺ	0324	₁ 03242846	
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL	NAME - insert on , are debtor r	name (2a or 2b) - do not abbreviate or o	ombine names		
2a. ORGANIZATION'S NAME					
	` (
OR 2b. INDIVIDUAL'S LAST NAME		STAGME	MIDDLE NAME		SUFFIX
		0,			
			STATE	POSTAL CODE	COUNTRY
2c. MAILING ADDRESS	СІТ	Y	SIAIE	FOSTAL CODE	000
				ANUTATION N. 10 # 15	
	E OF ORGANIZATION 2f.	JURISDICTION OF CAGANIZATION	}2g. ORG	ANIZATIONAL ID #, if any	_
ORGANIZATION DEBTOR			l		NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL	ASSIGNEE of ASSIGNOR S/P) -	insert only one secured party princ (3)	or 3b)		
3a. ORGANIZATION'S NAME	<u> </u>		64		
BELMONT BANK & TRUST	COMPANY		4		
OR 3b. INDIVIDUAL'S LAST NAME		RST NAME	MIDDLE	NAME	SUFFIX
SB. HADIVIDUAL S CAST HANDE			Q_{i}		
	ich	rv	ST/ (TE	POSTAL CODE	COUNTRY
3c. MAILING ADDRESS	l'.		1=1	100534	USA
8250 WEST BELMONT AVEN	OR (CHICAGO	IL	70.334	USA

4. This FINANCING STATEMENT covers the following collateral:

All inventory, equipment, accounts (including but not limited to all health-care-insurance receivables), chattel paper instruments (including but not limited to all promissory notes), letter-of-credit rights, letters of credit, documents, deposit accounts, investment property, money, other rights to payment and performance, and general intangibles (including but not limited to all software and all payment intangibles); all oil, gas and other minerals before extraction; all oil, gas, other minerals and accounts constituting as-extracted collateral; all fixtures; all timber to be cut; all attachments, accessions, accessories, fittings, increases, tools, parts, repairs, supplies, and commingled goods relating to the foregoing property, and all additions, replacements of and substitutions for all or any part of the foregoing property; all insurance refunds relating to the foregoing property; all good will relating to the foregoing property; all records and data and embedded software relating to the foregoing property, and all equipment, inventory and software to utilize, create, maintain and process any such records and data on electronic media; and all supporting obligations relating to the foregoing property; all whether now existing or hereafter arising, whether now owned or hereafter acquired or whether now or hereafter subject to any rights in the foregoing property; and all products and proceeds (including but not limited to all insurance payments) of or relating to the foregoing property.

								_
5.	ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR	CONSIGNEE/CONSI	GNOR BAILEE/BAILO	R SELLER/BUYER	AG. LIEN	NON-UCC FILIN	Ģ
	This FINANCING STATEMENT is to be filed ESTATE RECORDS. Attach Addendum			ck to REQUEST SEARCH REDITIONAL FEE!	PORT(S) oπ Debtor(s) [optional]	All Debtors	Debtor 1 Debtor	2
	OPTIONAL FILER REFERENCE DATA		11. 100 11.0					

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UCC FINANCING STATEMENT ADDENDUM]			
FOLLOW INSTRUCTIONS (front and back) CAREFULLY 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATE	MENT			
9a ORGANIZATION'S NAME				
DOLYVA PROPERTIES, LLC - 1517 N. RO	CKWELL ST.			
OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX			
10. MISCELLANEOUS:				
A ADDITIONAL DERIOD'S EVACT FULL FISAL NAME - insert only one ri		THE ABOVE SPACE	EIS FOR FILING OFF	ICE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL FGAL NAME - insert only one no	ame (11a or 11b) - do not abbrev	iate or combine names		
11a. ORGANIZATION'S NAME		-		
		Lupp	FNIABAF	ISUFFIX
OR 11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDL	ENAME	SUFFIX
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
11d. SEE INSTRUCTIONS ADD'L INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	11f, JURISDICTION OF ORGA	NIZATION 11g. O	RGANIZATIONAL ID #, if	any
	NAM = - i sert only one name	(12a or 12b)	· · · · · · · · · · · · · · · · · · ·	
12a. ORGANIZATION'S NAME	4/2			
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDL	E NAME	SUFFIX
12c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
 13. This FINANCING STATEMENT covers timber to be cut or collateral, or is filed as a fixture filling. 14. Description of real estate: Exhibit A. 	16. Additional collateral descri	ption:		
•				
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 a			
		Trustee acting with respect to	property held in trust	or Decedent's Estate
	18. Check only if applicable a	nd check <u>only</u> one box.		
	Debtor is a TRANSMITTI			
		Manufactured-Home Transaction	EUON .	
	Filed in connection with a	Public-Finance Transaction		

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ORDER NO.: 1301 - 004401123

ESCROW NO.: 1301 _ 004401123

1

STREET ADDRESS: 1517 NORTH ROCKWELL STREET

CITY: CHICAGO

ZIP CODE: 60622

TAX NUMBER: 16-01-204-021-0000

COUNTY: COOK

LEGAL DESCRIPTION:

· Open of the contract of the LOT 22 IN BLOCK 4 IN WINSLOW, JACOBSON AND TALLMAN'S SUBDIVISION OF THE NORTHEAST 1/4 PRTr. OF THE NORTHEAST 1/4 OF SECTION 1, TOWNSHIP 3% NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.