## **UNOFFICIAL COPY**

		Doc#: 1021034107 Fee: \$40. Eugene "Gene" Moore RHSP Fee:\$10 Cook County Recorder of Deeds Date: 07/29/2010 01:58 PM Pg: 1 of			
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY	·				
A. NAME & PHONE OF CONTACT AT FILER (optional)					
B. SEND ACKNOWLEDGMENT TO: (Name and Address)  Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808					
	THE ABOVE	SPACE IS FOR FILING OFFICE U	SE ONI V		
1. DEBTOR'S EXACT FULL LEGAL N' vin insert only one debtor name (1a or	1b)-do notabbreviate or combine names	- Note to 1 or 1   Little of 1   Or 0	JE CIRE!		
12 ORGANIZATION'S NAME			·····		
OR HADADY CORPORATION 1b. INDIVIDUAL'SLASTNAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 510 WEST 172ND STREET	SOUTH HOLLAND	STATE POSTAL CODE	COUNTRY		
1d. SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORGANL ATTON	11, JURISDICTION OF ORGANIZATION	IL 60473 1g. ORGANIZATIONAL ID #, if any	USA		
ORGANIZATION CORP	DE	DE0796474			
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one  [2a. ORGANIZATION'S NAME]	t c votor ner ne (2a or 2b) - do not abbreviate or comi	ine hames			
	$\tau_{\circ}$				
OR 25. INDIVIDUAL'S LAST NAME	FIRST NA. VE	MIDDLE NAME	SUFFIX		
2t. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY		
2d. SEEINSTRUCTIONS ADD'L INFO RE   2e, TYPE OF ORGANIZATION ORGANIZATION DEBTOR	21. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, # any	NONE		
3. SECURED PARTY'S NAME (or NAME oFTOTAL ASSIGNEE of ASSIGNORS 32. ORGANIZATION'S NAME	i/P) - insert only <u>one</u> secured party name (3a or 3b)		LINONE		
FIFTH THIRD BANK		<b>7</b> 0.			
36. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDO EN ME	SUFFIX		

4. This FINANCING STATEMENT covers the following collateral:

222 S. RIVERSIDE PLAZA

3c. MAILING ADDRESS

All assets of the Debtor that are now or may become fixtures located on the real proper  $\gamma$ described on Exhibit A attached hereto, whether now owned or hereafter acquired, together with all proceeds thereof.

CHICAGO

(Real Estate Records - Fixture Filing)

5. ALTERNATIVE DESIGNATION (if applicable): LESSEEALESSOR  5. This FINANCING STATEMENT is to be filed (for record) (or recorded as a state). Addendism	in the REAL 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)
B, OPTIONAL FILER REFERENCE DATA	All Debtor 1   Debtor 1   Debtor 2
IL-Cook County	461047-1a

POSTA CODE

USA

60606

STATE

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UCC FINANCIA			UM					
9. NAME OF FIRST DE			GSTATEMENT		┪			
9a, ORGANIZATION'S		TOD TIED I WARRANT	O O 17(1 EMEJE)		1			
OR HADADY C	CORPORATIO	N			ŀ			
96, INDIVIDUAL'S LAS	TNAME	FIRST NAME	MIDDL	E NAME, SUFFO	4			
10.MISCELLANEOUS:					1			
IL-Cook Cov	ty							
	<i>h</i>							
	000/	×			THE ABOV	E SPACE I	S FOR FILING OF	FICE USE ONLY
11. ADDITIONAL DEBT			ly one name (11a or 11	b) - do not abbre				
11a, ORGANIZATIONS	NAME	Ox		-,				
OR 115, INDIVIDUAL'S LAS	ST NAME		FIRST NAME		<u> </u>	MIDDLE	VAME	SUFFIX
					.,		4 2102	100712
11c. MAILING ADDRESS			<u> </u>		<del></del>	STATE	POSTAL CODE	COUNTRY
			$\Psi_{Z}$			1		İ
11d. SEE INSTRUCTIONS	ADD'L INFO RE 11 ORGANIZATION DESTOR	e, TYPE OF ORGANIZAT	ION 111. URISDA	CTION OF ORGA	NIZATION	11g. ORG	ANIZATIONAL 10 #, ii	fany None
12. ADDITIONAL SE	ECURED PARTY'S	gr ASSIGNOR	S/P'S NAME inse	ert c .ay on a name	(12a or 12b)			T Itole
12a, ORGANIZATION'S	NAME				<u>, ,                                  </u>			
OR				9/	5			
12b. INDIVIDUAL'S LAS	STNAME		FIRST NAME		/X,	MIDDLE	IAME	SUFFIX
12c. MAILING ADDRESS		-				ļ	<del></del>	
.20. III SQUEED PROPERTY			CITY			STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATE	EMENT covers   timber	to be out or as-extr	acted 16 Additions	collateral descr	- Control	J	T'S O	
collateral, or is filed as	1 1		10172001	CONSTRUCTIONS.	рси.	0.		
14. Description of real estat	es -						<b>Z</b> .	
SEE EXHIBIT A	4							
							9,	
				•				XC.
							Ť	10
								6
			}					<u> </u>
5. Name and address of a		re-described real estate						
(if Debtor does not have			]					
HADADY CORPOR 510 WEST 172N								
SOUTH HOLLAND		3	1	_	d check <u>only</u> one ba		<u> </u>	
							perty held in trust or	Decedent's Estate
			<del></del> 1		d check <u>only</u> one box	ι		
			<b>     </b>	TRANSMITTING				
			I 🗀		lanufactured-Home		•	
			[ Filed in co	naction with a F	ublic-Finance Transa	action — effe	ctive 30 years	

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### **UNOFFICIAL COPY**

#### **EXHIBIT A**

### Legal Description

THAT PART OF THE NORTH 1/2 OF THE NORTHEAST 1/4 OF SECTION 25. TOWNSHIP 35 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, DESCRIBED AS FOLLOWS: BEGINNING AT A POINT ON THE EAST LINE 416 FEET NORTH OF THE SOUTHEAST CORNER OF THE NORTH 1/2 OF THE NORTHEAST 1/4 OF SAID SECTION 25; THENCE WEST ON A LINE 90 DEGREES, 00 MINUTES, 00 SECONDS TO THE EAST LINE OF NORTHEAST 1/4 OF SECTION 25, 450 FEET; THENCE NORTH 200 FEET; THENCE EAST 450 FEET TO THE EAST LINE OF SAID NORTHEAST 1/4; I'HENCE SOUTH 200 FEET TO THE POINT OF BEGINNING IN COOK COUNTY, ILLITIOIS.

Tax I.D. Number:

31-25-201-)05-0000

Property Address:

n Ave. 2250 South Western Avenue, Park Forest, Illinois 60466