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Doc#: 1134910060 Fee: \$40.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 12/15/2011 03:38 PM Pg: 1 of 3

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

RETURN TO:
CORPORATION SERVICE CO.
33 N LASALLE STREET
SUITE 2320
CHICAGO, IL 60602-3413

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 Superior Carriers, Inc. | | | | | | |
| OR | 1b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE NAME | SUFFIX | |
| 1c. MAILING ADDRESS 711 Jorie Blvd., Suite 101 N | | | CITY Oak Brook | STATE IL | POSTAL CODE 60523 | COUNTRY USA |
| 1d. SEE INSTRUCTIONS | ADD'L INFO RE ORGANIZATION DEBTOR | 1e. TYPE OF ORGANIZATION Corporation | 1f. JURISDICTION OF ORGANIZATION Virginia | 1g. ORGANIZATIONAL ID #, if any VA 0052990-9 <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 | | | | | | |
| OR | 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 one secured party name (3a or 3b)

| | | | | | | |
|--|----------------------------|--|-----------------------|--------------------|----------------------------------|-----------------------|
| 3a. ORGANIZATION'S NAME Bank of America, N.A., as Collateral Agent | | | | | | |
| OR | 3b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE NAME | SUFFIX | |
| 3c. MAILING ADDRESS 901 Main Street | | | CITY Dallas | STATE TX | POSTAL CODE 75202-3714 | COUNTRY USA |

4. This FINANCING STATEMENT covers the following collateral:

All right, title and interest in and to all personal property and fixtures of the Debtor, whether now owned or existing or hereafter created, acquired or arising.

| | | | | | | |
|---|---|--|--|---------------------------------------|-----------------------------------|---|
| 5. ALTERNATIVE DESIGNATION (if applicable): | <input type="checkbox"/> LESSEE/LESSOR | <input type="checkbox"/> CONSIGNEE/CONSIGNOR | <input type="checkbox"/> BAILEE/BAILOR | <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 | 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (if applicable) [ADDITIONAL FEE] (optional) | | <input type="checkbox"/> All Debtors | <input type="checkbox"/> Debtor 1 | <input type="checkbox"/> Debtor 2 | |
| 8. OPTIONAL FILER REFERENCE DATA | | | | | | |

To be filed in Cook County, Illinois Recorder of Deeds Add'l Pages: 2

025715002

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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 STATEMENT | | |
| 9a. ORGANIZATION'S NAME | | |
| Superior Carriers, Inc. | | |
| 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 name (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 |
| | | | | <input 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.

14. Description of real estate:
See Schedule I attached hereto and made a part hereof.

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

Debtor

| | |
|--|---|
| 17. Check only if applicable and check only one box. | |
| Debtor is a <input type="checkbox"/> Trust | or <input type="checkbox"/> Trustee acting with respect to property held in trust |
| or <input type="checkbox"/> Decedent's Estate | |
| 18. Check only if applicable and check only one box. | |
| <input type="checkbox"/> Debtor is a TRANSMITTING UTILITY | |
| <input type="checkbox"/> Filed in connection with a Manufactured-Home Transaction — effective 30 years | |
| <input type="checkbox"/> Filed in connection with a Public-Finance Transaction — effective 30 years | |

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SCHEDULE I

LEGAL DESCRIPTION

LOTS 3 AND 6 AND THE SOUTH 1/2 OF LOTS 2 AND 5 IN BLOCK 6 AND LOT 3 AND THE SOUTH 50 FEET OF LOT 2 IN BLOCK 7 TOGETHER WITH ALL THAT PART OF VACATED LEAVITT STREET LYING BETWEEN AND ADJOINING THE AFORESAID LOTS IN BLOCKS 6 AND 7 IN ANDERSON'S DIXIE HIGHWAY SUBDIVISION OF THE SOUTH 66.65 ACRES LYING WEST OF OLD VINCENNES ROAD OF THE WEST 1/2 OF THE NORTH 1/2 OF SECTION 19, TOWNSHIP 36 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

| | |
|------------------|--|
| Property Address | 2125 West 162nd Street Markham, Illinois 60426 |
| P.I.N. Nos. | 29-19-129-003-0000 29-19-129-006-0000 29-19-129-007-0000 29-19-129-009-0000 29-19-130-002-0000 29-19-130-002-0000 |

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