



## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) 8250 West Belmont Avenue Chicago, IL 60634 AR: DIORONE Doc#: 1214334051 Fee: \$42.00 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds Date: 05/22/2012 09:22 AM Pg: 1 of 3

/ • ·		OW YI	THE ABOVE	E SPACE IS FO	OR FILING OFFICE U	SE ONLY
		E - insert only one debtor name (1a	or 1b) - do not abbreviate or combine names			
1a. ORGANIZATION'S N					·	
3643 N. WA	YNE, LLC					
OR 16. INDIVIDUAL'S LAST	NAME	X.	FIRST NAME	MIDDLE	NAME	SUFFIX
1c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
2847 N PULAS	KI RD, STI	ECS	CHICAGO	IL	60641	USA
1d. SEE INSTRUCTIONS	ADD'L INFO RE	1e. TYPE OF OR ANIX ITION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if an	у
	ORGANIZATION DEBTOR	LLC	l IL	<sub>1</sub> 0375	59377	NONE
2. ADDITIONAL DEBTO	R'S EXACT FULL	LEGAL NAME - insen our one o	debtor name (2a or 2b) - do not abbreviate or con	nbine names		
2a. ORGANIZATION'S N	IAME					
OR 2b. INDIVIDUAL'S LAST NAME		F RST N ME	MIDDLE	MIDDLE NAME		
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS	ADD'L INFO RE	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF OF GANIZATION	2g. ORG	  ANIZATIONAL ID #, if an	<u> </u>
20.	ORGANIZATION DEBTOR	1		1		None
3. SECURED PARTY'S	NAME (or NAME)	of TOTAL ASSIGNEE of ASSIGNOR	R S/P) - insert only one secured par y name (*) a o	r 3b)		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3a. ORGANIZATION'S N	<u> </u>					
		RUST COMPANY		h/		
OR 36. INDIVIDUAL'S LAST	NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
				0,1		
3c. MAILING ADDRESS		······································	CITY	STATE	POSTAL CODE	COUNTRY
8250 WEST BE	ELMONT A	VENUE	CHICAGO	IL	50634	USA

4. This FINANCING STATEMENT covers the following collateral:

All inventory, equipment, accounts (including but not limited to all health-care-insurance receivables), chattel parer, 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.

		LESSEE/LESSOR		CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. L	IEN	NON-U	CC FILING
6.	This FINANCING STATEMENT is to be filed [ ESTATE RECORDS. Attach Addendum	for record] (or recorded)	in the REAL [if applicable]		JEST SEARCH REPOR FEE]	(T(S) on Debtor(s) [optional]	All Debto	rs De	ebtor 1	Debtor 2
•	ORTIONAL FILER REFERENCE DATA									

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## **UNOFFICIAL COPY**

UCC FINANCING STATEMENT						
FOLLOW INSTRUCTIONS (front and back) CARE  9. NAME OF FIRST DEBTOR (1a or 1b) ON RE		FMENT				
9a. ORGANIZATION'S NAME	LATED THANGING STATE	LWLITT				
OR 3643 N. WAYNE, LLC	RST NAME	MIDDLE NAME, SUFFIX				
35. M31/133/123 213/ 17/11/12	10.10.00	in Bock (Wine, Go) ( W				
10. MISCELLANEOUS:						
OA						
70_						
			THE ABOVE	SPACEI	S FOR FILING OFF	ICE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL LEG	GAL NAME - insert only one no	ame (11a or 11b) - do not abbrev	viate or combine name:	s		
11a. ORGANIZATION'S NAME						
OR 11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX
11c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
THE RESIDENCE OF THE PARTY OF T						
114 PEE INSTRUCTIONS ADDITINED DE 110	TYPE OF ORGANIZATION	1 11f. JURISDICTION OF ORGA	MIZATION	11n ORG	GANIZATIONAL ID #. if	anv
ORGANIZATION	TIPE OF ORGANIZATION		1112211011	rig. One	BANDATIONAL ID #. II	·
DEBTOR	-					NONE
12. ADDITIONAL SECURED PARTY'S o	ASSIGNOR S/P'S	I AME - insert only one name	(12a or 12b)			
12a. ORGANIZATION'S NAME		0,				
OR		<u> </u>				
12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
		(/)_				
12c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers X timber to	be cut or X as-extracted	16. Additional collateral descri	iption <sup>,</sup>			
collateral, or is filed as a fixture filing.	<b>-</b>		(//			
14. Description of real estate:			4			
Exhibit A.				0		
				)		
				(	Dr. Co	
					/x.	
					. (2)	
					C	
		1				
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 ar	nd check <u>only</u> one box.			
		Debtor is a Trust or	Trustee acting with res	pect to pro	pperty held in trust	or Decedent's Estate
		18. Check only if applicable a	nd check only one box.			<del></del>
		Debtor is a TRANSMITTIN				
		Filed in connection with a		ransaction		
		Filed in connection with a				
		Filed in connection with a	r conc-i mance transa		l Financial Solutio	

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## **UNOFFICIAL COPY**

LOT 7 IN BLOCK 11 IN THE SUBDIVISION OF BLOCKS 11 AND 12 IN EDSON'S SUBDIVISION OF THE SOUTH 3/4 OF THE EAST 1/2 OF THE NORTHWEST 1/4 OF SECTION 20, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 14-20-124-012-0000

Property of Cook County Clark's Office