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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) epaned by a Return to Belmont Bank & Trust Company 8250 West Belmont Avenue Chicago, IL 60634 NO - 10229

Doc#: 1219234041 Fee: \$42.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 07/10/2012 09:27 AM Pg: 1 of 3

H 20 000	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
1. DEBTOR'S EXACT FULL LL GA'. NAME - insert only one do	ebtor name (1a or 1b) - do not abbreviate or combine name	es			
1870 NORTH DAMEN AVE., LLC					
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY		
2847 N PULASKI RD, STE CS	CHICAGO	IL 60641	USA		
1d. SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORG	AN ZATICN 1f. JURISDICTION OF ORGANIZATIO	N 1g. ORGANIZATIONAL ID #, if ar	ту		
ORGANIZATION LLC	IL	i	NONE		
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME -	nsert only on det or name (2a or 2b) - do not abbreviate	or combine names			
2a. ORGANIZATION'S NAME	4				
OR 2b. INDIVIDUAL'S LAST NAME					
26. INDIVIDUAL'S LAST NAME	FIRS' NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY		
2d. SEE INSTRUCTIONS ADD'L INFO RE 2e. TYPE OF ORGORGANIZATION DEBTOR	ANIZATION 2f. JURISDICTION OF OT, GA VIZATIO	N 2g. ORGANIZATIONAL ID #, if ar	·		
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNED	of ASSIGNOR S/D) insert only one secured party of	(30 c (3b)	NONE		
3a. ORGANIZATION'S NAME	and second party has to	(30)	·····		
BELMONT BANK & TRUST COM	MPANY	C/A/			
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDELE NAME	SUFFIX		
		2,1			
3c. MAILING ADDRESS	CITY	STATE TOSTAL CODE	COUNTRY		
8250 WEST BELMONT AVENUE	CHICAGO	IL (60324	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	/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-L	JCC 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	RT(S) on Debtor(s) [optional]	All Debtors	Debtor 1	Debtor 2
O ODTIONAL SILED DESERVACE DATA								

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UCC FINANCING STATEMENT	ADDENDUM		1			
9. NAME OF FIRST DEBTOR (1a or 1b) ON RE	FULLY					
9a ORGANIZATION'S NAME	LATED FINANCING STATE	MENT				
OR 1870 NORTH DAMEN AVE	FIIC					
9b. INDIVIDUAL'S LAST NAME FIR	RST NAME	MIDDLE NAME.	OUE ED			
		INIDOLE NAME,	SUFFIX			
10. MISCELLANEOUS:						
000						
			TUE ABOVE			
11. ADDITIONAL DEBTOR'S EXACT FULLE S	AL NAME - insert only one nom	o (dda andda)	THE ABOVE	SPACE	IS FOR FILING OFFI	CE USE ONLY
11a. ORGANIZATION'S NAME	at 10 state - insert only one harr	ie (11a or 11b) - do no	t abbreviate or combine nam	es		
00						
OR 11b. INDIVIDUAL'S LAST NAME	TF TF	IRST NAME		MIDDLE	Alane	
				IMIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS		ITY			T	
				STATE	POSTAL CODE	COUNTRŸ
11d. SEE INSTRUCTIONS ADD'L INFO RE 11e. TY	YPE OF ORGANIZATION	If JURISDICTION OF	ORGANIZATION	115 00		
ORGANIZATION DEBTOR	1	CONTROL TO THE CO	ORGANIZATION	[11g. OR	GANIZATIONAL ID#, if ar	iy
12. ADDITIONAL SECURED PARTY'S or	ASSIGNOD CUDIO N				·	NONE
12a ORGANIZATION'S NAME	ASSIGNOR S/P'S N	AN E - insert only one	name (12a or 12b)			
OR 12b. INDIVIDUAL'S LAST NAME	Fr	RST NAME		1		
	ļ''	. to , to die	<i>/</i> /,	MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS	Ci	TY		07475	Jones-	
	-			STATE	POSTAL CODE	COUNTRY
This FINANCING STATEMENT covers timber to be collateral, or is filed as a fixture filing. Description of real estate:	cut or X as-extracted 16	a. Additional collateral	description;			
Exhibit A.						
				9,		
				,	Office	
					'C_	
					()	
		•				
15. Name and address of a RECORD OWNER of above-desc	uribad rapil astat - UE					
Debtor does not have a record interest):	annen rear estate (II					
	<u> </u>					
			ole and check only one box.			
			Trustee acting with resp	ect to prop	erty held in trust or	Decedent's Estate
	18.		le and check only one box.			
	⊢	Debtor is a TRANSMI				
			th a Manufactured-Home Tra			
		Filed in connection wit	h a Public-Finance Transact	tion		

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LOT 30 IN BLOCK 9 IN PIERCE'S ADDITION TO HOLSTEIN AND BEING IN THE NORTH 1/2 OF THE SOUTHWEST 1/4 OF SECTION 31, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 14-31-315-043-0000

Alliance Title Corporation)
5523 N. Cumberland Ave., Sec. 1211
Chicago, IL 60656
(773) 556-2222