UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Phone: (800) 331-3282 Fax: (818) 6	662-4141
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	20748 JPMORGAN CHASE
CT Lien Solutions	37102673
P.O. Box 29071 Glendale, CA 91209-9071	ILIL FIXTURE
/-ile with: CC IL Co	ook, IL

Doc#: 1306015068 Fee: \$42.00 Karen A. Yarbrough RHSP Fee: \$10.00 Cook County Recorder of Deeds Date: 03/01/2013 02:32 PM Pg: 1 of 3

file with: CC IL Cook, IL	File with: CC IL Cook, IL THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY		
DEBTOR'S EXACT FULL LEGAL N MF - insert only one debtor name	e (1a or 1b) - do not abbreviate or combine na	imes	
1a. ORGANIZATION'S NAME			
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
MONDI	DOMINICK	J	
10: MAII ING ADDRESS 229 E LAKE SHORE DRIVE APT 8E	CHICAGO	STATE POSTAL CODE 60611	USA
Id. SEE INSTRUCTIONS ADD'L INFO RE 10. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if an	ıy
ORGANIZATION DEBTOR	0		NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only of	ne deur∋r name (2a or 2b) - do not abbreviate	or combine names	· · · · · ·
2a, ORGANIZATION'S NAME	C		
2b. INDIVIDUAL'S LAST NAME	FIRST N.MF	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS	СПҮ	STATE POSTAL CODE	COUNTRY
2d. <u>SEE INSTRUCTIONS</u> ADD'L INFO RE 2e. TYPE OF ORGANIZATIO ORGANIZATION DEBTOR	21. JURISDICTION OF ORGAN LATICN	2g. ORGANIZATIONAL ID #, if ar	ny None
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASS	SIGNOR S/P) - insert only one secured par vi	uma (3a or 3b)	
JPMORGAN CHASE BANK, N.A.	,	4	
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	M.DDLE NAME	SUFFIX
3c MAII ING ADDRESS	CITY	STATE POST CODE	COUNTRY
601 OAKMONT LANE SUITE 300	WESTMONT	IL 60559	USA

4. This FINANCING STATEMENT covers the following collateral:

All of the debtor's right, title and interest in and to that certain cooperative unit number 8E located at 229 E Lake Shore Drive, Chicago, IL 60611, including, without limitation, those certain co-op share, that certain proprietary lease and all proceeds thereof.

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5. ALTERNATIVE DESIGNATION [if applicable]	1	CONSIGNOR BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
This FINANCING STATEMENT is to be file ESTATE RECORDS. Attach Addendum	ed [for record] (or recorded) in the REAL (if applicable)	7. Check to REQUEST SEARCH REPO [ADDITIONAL FEE]	RT(S) on Debtor(s) [optional]	All Debtors Deb	otor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA	-		-		
27102673	1100191694	0000	685800		

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FINANCING STATEME	ENT ADDENDUM ack) CAREFULLY						
9. NAME OF FIRST DEBTOR (1a or 1b) 9a. ORGANIZATION'S NAME	ON RELATED FINANCING STATE	MENT					
OR SHINDIVIDUAL'S LAST NAME MONDI	FIRST NAME DOMINICK	MIDDLE NAME, SUFFIX	i				
10. MISCELLANEOUS							
37102673-IL-31							
20748 JPMORGAN CHASE							
	JUF25300 110	0191694	THE ABOVE SPA	CE IS FOR	FILING OFFICE U	ISE ONLY	
11. ADDITIONAL DEBTOR'S EXACT F	ULL LEG L IAME - insert only one i	name (11a or 11b) - do not a	bbreviate or combine n	ames			
11a. ORGANIZATION'S NAME	0.0						
OR 11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE N	IAME	SUFFIX	
11c. MAILING ADDRESS	0,	CITY		STATE	POSTAL CODE	COUNTRY	ſ
11d. SEE INSTRUCTION ADD'L INFO		117. JURISDICTION OF OR	GANIZATION	11g. ORG	SANIZATIONAL ID		NONE
DEBTOR							NONE
12. ADDITIONAL SECURED PAR 12a. ORGANIZATION'S NAME	RTY'S or ASSIGNOR S/P's	NAME - insert culty one name	e (12a or 12b)		···		
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE N	IAME	SUFFIX	
				1			
12c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY	7
13. This FINANCING STATEMENT covers collateral or is filed as a fixture file	timber to be cut or as-extracted	16. Additional collateral des	scription:	,			
14. Description of real estate:							
Description: See attached Ex 17-03-208-007-0000	hibit A. Parcel ID:						
		;					
15. Name and address of a RECORD OWNE (if Debtor does not have a record intere Michigan Building Corporation	est):						
229 E Lake Shore Drive, Chic	ago, IL, 60611	17. Check <u>only</u> if applicable Debtor is a Trust or	and check <u>only</u> one box. Trustee acting with respe	ect to prope	erty held in trust	or Decedent's	Estate
		18. Check <u>only</u> if applicable	and check only one box.				
		Debtor is a TRANSMIT		rancastina			
			n a Manufactured-Home Ti n a Public-Finance Transa				
		- NOW NO CONTROLLED I WILL			Prepared by CT Lie	n Solutions D.O. Bo	v 2007

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EXHIBIT "A"

Leasehold Estate, as defined in Paragra instrument herein referred to as the Ass	ignment of Lease da	ted	and recorded	as
document made by and be Dominc Mondi, as Lessee, which Lease	etween W. Sanford demises the following			
APARTMENT 8E OF 229 EAST LAKE S DESCRIBED REAL ESTATE:	SHORE DRIVE, WH	ICH IS LOCATED	ON THE FOLLOW	VING
THE EAST 16 FEET OF LOT 9, ALL O LOTS 1 TO 6 INCLUSIVE IN FITZ-SIMO OF CANAL TRUSTEE'S SUBDIVISION TOWNSHIP 39 NORTH, RANGE 14 E	ON'S ADDITION TO OF THE SOUTH F	CHICAGO, A SU RACTIONAL 1/4	IBDIVISION OF PA OF FRACTIONAL	RT OF BLOCK 8 SECTION 3,
ILLINOIS.				
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