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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

WORLD FUEL SERVICES INC DBA TEXOR PETROLEUM

B. E-MAIL CONTACT AT FILER (optional)
kelly.allen@carterenergy.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

WORLD FUEL SERVICES DBA TEXOR PETROLEUM
P.O. BOX 29106
SHAWNEE MISSION, KS 66201
913-643-2247

Doc#: 1331745034 Fee: \$40,00 RHSP Fee: \$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 11/13/2013 10:32 AM Pg: 1 of 2

P.U. BOX 29106				
SHAWNEE MISSION, KS 66201 913-643-2247				
713-043-2247	, I			
	THE ABOVE	SDACE IS E	OR FILING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use on any will not fit in line 1b) (over one).	exact, full name; do not omit, modify, or abbreviate any pa	art of the Debte	or's name): if any part of the L	ONLY
name will not fit in line 1b, leave an of item in ank, check here and	d provide the Individual Debtor information in item 10 of the	he Financing S	tatement Addendum (Form U	ildividdai Debtor (CC1Ad)
1a. ORGANIZATION'S NAME				
TANDEM FUELS, INC.				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
1c. MAILING ADDRESS				
44 E SIBLEY BLVD	DOLTON	STATE	POSTAL CODE	COUNTRY
		IL	60419	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use e name will not fit in line 2b, leave all of item 2 blank, check here] and	ארמ', fr:" name; do not omit, modify, or abbreviate any pa	rt of the Debto	r's name); if any part of the Ir	ıdividual Debtor'
2a. ORGANIZATION'S NAME	d provide the individual Debtor information in item 10 of th	ne Financing S	tatement Addendum (Form U	CC1Ad)
as one ment of the second				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PER JON AL NAME	ADDITIONAL NAME(S)/INITIAL(S)		
	THOU E POOLE WANTE	ADDITIO	MAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
	*/X,		. 307112 3032	000141111
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNO	OR SECURED PARTY): Provide on the Security Brate.	nome (2 2)	_	
3a. ORGANIZATION'S NAME		TIATIB (SA OF SE	<u>, , , , , , , , , , , , , , , , , , , </u>	
WORLD FUEL SERVCIES DBA TEX	KOR PETROLEUM			
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
		4		
3c. MAILING ADDRESS P.O. BOX 29106	CITY	STATE	POSTAL CODE	COUNTRY
	SHAWNEE MISSION	KS	65201	USA
4. COLLATERAL: This financing statement covers the following collatera	lr		U _{3C}	
-Four(4)Gasoline dispeners Tokheim branded -One(1)Gasoline/diesel dispener Tokheim brande	. d			\mathcal{M}'
-One(1)Citgo branded canopy	:u		18/C	y
-One(1)Citgo branded 3 product LED sign			O	2
-One(1)Ruby POS register console				,
-Walk in cooler				N
-All fixtures				- 1
-All Inventory				<i>/</i> V
-All Personal Property				V
				\mathcal{A}
				Y i
				15/
				1711
	a Trust (see UCC1Ad, item 17 and Instructions)	eing administer	ed by a Decedent's Personal	Representative
a. Check <u>only</u> if applicable and check <u>only</u> one box:	6b		applicable and check only o	
Public-Finance Transaction Manufactured-Home Transac	tion A Debtor is a Transmitting Utility	Agricult	ural Llen Non-UCC I	Filing
. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor Seller/Buyer	Bai	lee/Bailor Licens	ee/Licensor
. OPTIONAL FILER REFERENCE DATA: TANDEM FUELS, INC.			License	

1331745034 Page: 2 of 2

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UCC FINANCING STATEMENT ADDENDUN	1			
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; because Individual Debtor name did not fit, check here	if line 1b was left blank			
9a. ORGANIZATION'S NAME TANDEM FUELS, INC.				
OR 9b. INDIVIDUAL'S SURNAME				
FIRST PERSONAL NALE	***************************************			
ADDITIONAL NAME(S)/I' ITI/ L(S)	SUFFIX	THE ABOVE SPACE	IS FOR FILING OFFICE	USE ONLY
10. DEBTOR'S NAME: Provide (10a ir , ^0) only one additional Debtor name do not omit, modify, or abbreviate any part of the Debtor's name) and enter the 10a. ORGANIZATION'S NAME		n line 1b or 2b of the Financing	Statement (Form UCC1) (use	exact, full name;
OR 10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	7		The second secon	SUFFIX
10c. MAILING ADDRESS	CIT	STATE	POSTAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME OF ASSIGN	NOR SECURED PARTY	'S NAME: Provide only <u>one</u> r	ame (11a or 11b)	·'
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ONAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	СІТУ	STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		TS		
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	e 14. This FINANCING STATI	,	collateral is filed as a	fixture filing
 15. Name and address of a RECORD OWNER of real estate described in Item 16 (if Debtor does not have a record interest): TANDEM FUELS, INC. 44 E SIBLEY BLVD DOLTON IL 60419 	16. Description of real estate: LOT 21 IN BLOCK 7 AVALON ADDITION,A SUBDIVISION OF THE NORTH 1/2 OF LOT 1 AND THE NORTH 1/2 OF LOT 2 AND THE SOUTH 1/2 OF LOT 3(EXCEPT THE NORTH 20 ACRES)IN VERHOEVEN'S SUBDIVISION IN THE NORTHEAST 1/4 OF SECTION 9 TOWNSHIP 36 NORTH,RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN,IN COOK COUNTY,ILLINOIS. PIN# 29-09-210-023-0000			

17. MISCELLANEOUS: