UNOFFICIAL COPY

	1331745035			
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS	D R	0c#: 13(31745035 Fee: \$.00 RPRF Fee: \$1.00	40.00
A. NAME & PHONE OF CONTACT AT FILER (optional) WORLD FUEL SERVICES INC DBA TEXOR PET	ROLEUM	aren A.Yarbi ook County	rough Recorder of Deeds	
B. E-MAIL CONTACT AT FILER (optional)	D	ate: 11/13/2(013 10:32 AM Pg: 1	of 2
kelly.allen@carterenergy.com	····			
C. SEND ACKNOWLEDGMENT TO: (Name and Address) WORLD FUEL SERVICES DBA TEXOR PETRO	OLEUM			
P.O. BOX 29106	.			
SHAWNEE MYSSION, KS 66201				
913-643-2247				
			R FILING OFFICE USE	
	name; do not omit, modify, or abbreviate any p the Individual Debtor information in item 10 of	part of the Debtor the Financing St	's name); if any part of the In atement Addendum (Form UC	dividual Debtor's CC1Ad)
1a. ORGANIZATION'S NAME POPULAR FUELS, INC.				·····
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 16801 ELLIS AVE	SOUTH HOLLAND	STATE	37058	USA
2 DERTOR'S NAME: Provide only one Debtor name (2a or 2b) (use e.g., Juli)	name; do not omit, modify, or abbreviate any p ne individual Debtor information in item 10 of	part of the Debtor the Financing St	's name); if any part of the in atement Addendum (Form U	dividual Debtor's CC1Ad)
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
		40 04	<u> </u>	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURATION'S NAME	DRED PARTY): Provide only one Secured Par	ty name (3a or 3t	0)	
WORLD FUEL SERVCIES DBA TEXOR	PETROLEUM			
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS P.O. BOX 29106	SHAWNEE MISSION	STATE	66201	USA
4. COLLATERAL: This financing statement covers the following collateral: -Three(3)Gasoline dispensers Gilbarco brand -One(1)Gasoline/Diesel dispenser Gilbarco brand -One(1)10ft gasoline/diesel ID price sign -One(1)Passport POS register console -Walk in cooler -All Fixtures			Office .	2
-All Inventory -All Personal Property				y y FM
	(see UCC1Ad, item 17 and Instructions)		ered by a Decedent's Person	
6a. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transmitting Utility		if applicable and check <u>only</u> litural Lien Non-UCC	

Consignee/Consignor

Bailee/Bailor

Seller/Buyer

7. ALTERNATIVE DESIGNATION (if applicable):

8. OPTIONAL FILER REFERENCE DATA: POPULAR FUEL, INC.

1331745035 Page: 2 of 2

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LICC FINANCING STATEMENT ADDENDUM

AME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statemen ecause Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME POPULAR FUELS, INC. 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL JAM.	nt; if line 1b was left blar	nk 					
9a. ORGANIZATION'S NAME POPULAR FUELS, INC. 9b. INDIVIDUAL'S SURNAME							
POPULAR FUELS, INC. 9b. INDIVIDUAL'S SURNAME							
9b. INDIVIDUAL'S SURNAME							
FIRST PERSONAL JAM'S		,,					
FIRST PERSONAL NAME							
ADDITIONAL NAME(S)/IF (TIA .(S)	SUF	FIX	THE ABOVE	SDACE	S FOR FILING OFFICE L	ISE ONLY	
DEBTOR'S NAME: Provide (10a (r 10°)) only one additional Debtor name	ne or Debtor name that o	did not fit in					
do not omit, modify, or abbreviate any part of the Deptor's name) and enter the	ne mailing address in lir	ne 10c	INC 10 of 20 of allo	manong o			
10a. ORGANIZATION'S NAME				,			
10b. INDIVIDUAL'S SURNAME							
INDIVIDUAL'S FIRST PERSONAL NAME							
INDIVIDUAL 3 FIR31 FERSUNAL NAME							
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	4					SUFFIX	
MAILING ADDRESS	CIT			STATE	POSTAL CODE	COUNTRY	
	GNOR SECUR 2D	PARTY	S NAME: Provide	only <u>one</u> na	ame (11a or 11b)		
11a. ORGANIZATION'S NAME	· ·	DX.					
11b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
TID. INDIVIDUAL O CONTROL							
. MAILING ADDRESS	CITY		0.	STATE	POSTAL CODE	COUNTRY	
ADDITIONAL SPACE FOR ITEM 4 (Collateral):							
ADDITIONAL SPACE FOR TIEM 4 (Collateral).							
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				()		
					IFIC.		
					Ö		
		WO STATE	MCNT.				
This FINANCING STATEMENT is to be filed [for record] (or recorded) in REAL ESTATE RECORDS (if applicable)	the 14. This Financ	14. This FINANCING STATEMENT: Covers timber to be cut					
Name and address of a RECORD OWNER of real estate described in item 16			h				
(if Debtor does not have a record interest):		ny oot	C INLOAT II	MET C	TATE CIDI EV AI	NOITION	
OPULAR FUELS, INC.	LOTSIN	LOT 8 IN BLOCK 5 IN CALUMET STATE-SIBLEY ADDITION A SUBDIVISION OF PART OF THE SOUTHEAST 1/4 OF					
6801 ELLIS AVE	A SUBDIV	O AND	OF PART OF T	L TUE	UTHWEST 1/4 OF	SECTIO	
OUTH HOLLAND, IL 37058	SECTION 10 TOWN	CHIP 36	FART OF T	NGE 1	4 EAST OF THE	THIRD	
	PRINCIP	10 TOWNSHIP 36 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.					
	PIN# 29-0	9-407-00	8-0000		,		
MISCELLANEOUS:		_	<u></u>	· 		···	