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13050180		Karen A.Yarbrough Cook County Recorder of Deeds Date: 02/11/2014 02:58 PM Pg:			
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS				210, 02, 17, 17, 17, 17, 17, 17, 17, 17, 17, 17	
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-8	58-5294				
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		:			
78814701 - 380920	7				
Corporation Service Company	•				
801 Adlai Ster ans in Drive	F. 11 M.				
Springfield, IL 62703	Filed In: Illinois (Cook)				
L 0 ₂	(000.1/	THE ABOVE	SPACE IS FO	R FILING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide only QL Debtor name (1a or 1b) name will not fit in line 1b, leave all \ fitem \ blank, check here	(use exact, full name; do not omit, and provide the Individual Debte				
1a. ORGANIZATION'S NAME The Musa Tadros Far	mily Limited Partnersh	ip			
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONA	FIRST PERSONAL NAME		NAŁ NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 903 S. Butternut Circle	спу Frankfort		STATE	POSTAL CODE 60423	COUNTRY
o DEDTODIS HAME A					
 DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) name will not fit in line 2b, leave all of item 2 blank, check here 	and provine the Individual Debt				
2a. ORGANIZATION'S NAME		4.4			
OR 2b. INDIVIDUAL'S SURNAME	FIRST PEF SON	FIRST PEF SONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	
2c. MAILING ADDRESS	СІТҮ	7%	STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of AS	SSIGNOR SECURED PARTY): Pro	ovide only one Sec red Par	ty name (3a or 3b)	
3a. ORGANIZATION'S NAME Urban Partnership Ba	ink				
OR 3b, INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 7936 S. Cottage Grove	сіту Chicago		STATE L	POSTAL CODE 60619	COUNTRY
4. COLLATERAL: This financing statement covers the following of	ollateral:)~	
All assets whether now owned or hereafte	•		-		
chattel paper, contracts, documents, equip	_				
property, deposit accounts, money, supporeplacements and substitutions relating to					
replacements and substitutions relating to	any or the lolegoing t	and an proceeds	ana produc	to of the loregoin	9
5. Check only if applicable and check only one hox: Collateral is	held in a Trust (see UCC1Ad, iter	n 17 and Instructions)	being administe	ered by a Decedent's Person	nal Representative
Check only if applicable and check only one box:			6b. Check only if applicable and check only one box:		
			I Contact	tural Lian Non-UC	C Eiline

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and instructions)	being administered by a Decedent's Personal Representative
6a. Check only if applicable and check only one box:	6b. Check only if applicable and check only one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buy	er Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: : IL - Cook County, Loan Nos. 66576/66577	78814701

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UCC FINANCING STATEMENT ADDENDUM **FOLLOW INSTRUCTIONS** 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME The Musa Tadros Family Limited Partnership 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME (SVICIT AL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10... or 10...) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS STATE POSTAL CODE COUNTRY ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY SOFFICE 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 14. This FINANCING STATEMENT covers as-extracted collateral is filed as a fixture filing covers timber to be cut 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): See Exhibit A attached hereto

17. MISCELLANEOUS:

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EXHIBIT A

LOTS 21, 22, 23, 24, 25, 26, 27, 28, 29, 30 AND 31 IN BLOCK 1 IN E. STANWOOD'S SUBDIVISION OF THE SOUTH 1/2 OF THE SOUTH 1/2 OF THE SOUTHWEST 1/4 OF THE NORTHWEST 1/4 OF SECTION 22, TOWNSHIP 37 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 25-22-118-013, 25-22-118-014, 25-22-118-015, 25-22-118-016, 25-22-118-017 AND 25-22-118-018

FOR INFORMATION PURPOSES ONLY: THE SUBJECT LAND IS COMMONLY KNOWN AS:

11438-11442 SOUTH MICHIGAN AVENUE Coot County: Clark's Office CHICAGO, ILLINOIS 60628

Chicago, Illinois 60628