UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

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

Doc#: 1416415013 Fee: \$42.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 06/13/2014 09:23 AM Pg: 1 of 3

Phone: (800) 331-3282 Fax: (818) 662-4141						
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@w	olterskluwer.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address		N LEASING				
CT Lien Solutions P.O. Box 29071	43584	398				
Glendale, CA 91209-9071		ILIL				
	FIXTU	IKE				
File \/ith. Cook, IL					OR FILING OFFICE U	
1. DEBTOR'S NAME: Provide only (1) D blor name (1a	or 1b) (use exact, full n	name; do not omit,	modify, or abbreviate any por information in item 10 of t	art of the Debtor	's name); if any part of the tement Addendum (Form i	Individual Debtor's JCC1Ad)
name will not fit in line 1b, leave all of item 1 plant, check he	re and provide th	ie ilidividual Depr	of information in term to or c	no i manong ou	tomority today (r own)	
B.L. Downey Compay LLC						
DR 1b. INDIVIDUAL'S SURNAME	0,5	FIRST PERSONAL NAME		ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
2125 Gardner Rd		Broadview		1L	60155	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a	or 2b) (use exact, ull r	nam∕; do not omit	, modify, or abbreviate any p	part of the Debtor	's name); if any part of the	Individual Debtor's
name will not fit in line 2b, leave all of item 2 blank, check he	ere and provide the	a individual Debt	or information in item 10 of t	he Financing Sta	itement Addendum (Form	UCC1Ad)
Ža. ORGANIZATION'S NAME						
DR 2b. INDIVIDUAL'S SURNAME		FIRST PERSO' A! NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
		94				
2c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE	of ASSIGNOR SECUI	RED PARTY): Pro	ovide only one fecure I Par	ty name (3a or 3	b)	
3a. ORGANIZATION'S NAME						
Ervin Leasing Company		·•	C	6/1	AND MARKET AND	SUFFIX
3b. INDIVIDUAL'S SURNAME		FIRST PERSONA	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUPPIX
		1			· · · · · · · · · · · · · · · · · · ·	
3c. MAILING ADDRESS		CITY		FATE	POSTAL CODE	COUNTRY
3c. MAILING ADDRESS 3893 Research Park Drive		1			,8108	USA
3893 Research Park Drive 4. COLLATERAL: This financing statement covers the follow Equipment is subject to Agreement # 176170-01	under Purchase C	Ann Arbor	605015831 issued Jur	МІ	,8108	USA
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3893 Research Park Drive 4. COLLATERAL: This financing statement covers the follow Equipment is subject to Agreement # 176170-01 including but not limited to the following equipment	under Purchase C	Ann Arbor Order # 20140		MI (ne 5, 2014 to	,8108	poration / 3 A S Y S Y
3893 Research Park Drive 4. COLLATERAL: This financing statement covers the follow Equipment is subject to Agreement # 176170-01 including but not limited to the following equipment Carrier Chiller Model 30RAP0306	under Purchase C	Ann Arbor Order # 20140		MI ne 5, 2014 to	8108 Chicayo Cooling Cor	poration / 3 // // // // // // // // // // // //
3893 Research Park Drive 4. COLLATERAL: This financing statement covers the follow Equipment is subject to Agreement # 176170-01 ncluding but not limited to the following equipment Carrier Chiller Model 30RAP0306 5. Check only if applicable and check only one box: Collatera Ga. Check only if applicable and check only one box:	under Purchase C	Ann Arbor Order # 20140		MI ne 5, 2014 to being administe 6b. Check only	red by a Decedent's Pers	poration / 3 // // // // // // // // // // // //

176170-01

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FOLLOW INSTRUCTIONS						
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State because Individual Debtor name did not fit, check here	tement; if line 1b was left blank					
9a. ORGANIZATION'S NAME B.L. Downey Compay LLC						
OR 9b. INDIVIDUAL'S SURNAME						
FIRST PERSONAL NAME						
ADDITIONAL NAME(SYINITIAL(5)	SUFFIX	THE ABOV	THE ABOVE SPACE IS FOR FILING OFFICE USE ONL			
10. DEBTOR'S NAME: Provide (10a or 10.1) c.lly one additional Debt do not omit, modify, or abbreviate any part of the Debtor's name) and of 10a. ORGANIZATION'S NAME	tor name or Debtor name that did n enter the mailing address in line 10	ot fit in line 1b or 2b of the F	inancing S	Statement (Form UCC1)	(use exact, full name	
OR 10b, INDIVIDUAL'S SURNAME			_			
INDIVIDUAL'S FIRST PERSONAL NAME	0	-	·····			
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)	7				SUFFIX	
10c. MAILING ADDRESS	CITY	<u> </u>	STATE	POSTAL CODE	COUNTRY	
11. ADDITIONAL SECURED PARTY'S NAME OF	ASSIGNOR SECURED TAP	Y'S NAME: Provide only	<u>опе</u> nam	e (11a or 11b)		
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	E	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
11c. MAILING ADDRESS	CITY	- Ch	STATE	POSTAL CODE	COUNTRY	
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		7	S	1.		
				Diffica		
13. This FINANCING STATEMENT is to be filed [for record] (or record REAL ESTATE RECORDS (if applicable)	ded) in the 14. This FINANCING	_	extracted	collateral X is filed	as a fixture filing	
15. Name and address of a RECORD OWNER of real estate described in (if Debtor does not have a record interest): BLD Real Estate LLC 2125 Gardner Road	Parcel ID: 16-16-420-004	estate:				
Broadview, IL 60155	Per attached Exh	ibit A				

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EXHIBIT "A"

LEGAL DESCRIPTION OF REAL ESTATE

THAT PART OF LOT 16 LYING WEST OF THE WEST RIGHT OF WAY LINE OF INDIANA HARBOR BELT RAILROAD COMPANY (EXCEPT THAT PART TAKEN FOR ROOSEVELT ROAD) IN SCHOOL TRUSTEES' SUBDIVISION OF SECTION 16, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

INCPERTY ADDRESS OF REAL ESTATE:

2125 Gardner Road Broadvi w. Plinois 60155

PERMANENT TAX IDI N'IFICATION NUMBER:

15-16-420-004; 15-16-420-005