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RHSP Fee: \$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 12/12/2014 02:51 PM Pg: 1 of 3

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
Rusty A. Fleming, Esq. 404/233-7000
B. E-MAIL CONTACT AT FILER (optional)
rfleming@mmmlaw.com
C. SEND ACKNOWLEDGEMENT TO: (Name and Address)
Morris Manning & Martin
Atlanta Financial Center #1600
3343 Peachtree Road NE
Atlanta, Georgia 303026

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here [ ] and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME
Tri City Foods of Illinois, Inc.
1b. INDIVIDUAL'S SURNAME
FIRST PERSONAL NAME
ADDITIONAL NAME(S)/INITIAL(S)
SUFFIX
1c. MAILING ADDRESS
4415 Highway 6
CITY
Sugar Land
STATE
TX
POSTAL CODE
77478
COUNTRY
USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any 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 here [ ] and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME
2b. INDIVIDUAL'S SURNAME
FIRST PERSONAL NAME
ADDITIONAL NAME(S)/INITIAL(S)
SUFFIX
2c. MAILING ADDRESS
CITY
STATE
POSTAL CODE
COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME
WELLS FARGO BANK, NATIONAL ASSOCIATION, as Administrative Agent
3b. INDIVIDUAL'S SURNAME
FIRST PERSONAL NAME
ADDITIONAL NAME(S)/INITIAL(S)
SUFFIX
3c. MAILING ADDRESS
1700 Lincoln St. 3rd Floor, MAC C7300-033
CITY
Denver
STATE
CO
POSTAL CODE
80203-4500
COUNTRY
USA

4. COLLATERAL: This financing statement covers the following collateral:

All goods of the Debtor that are or are to become fixtures located on the real property described on Exhibit "A" attached hereto (the "Land"), whether now owned or hereafter acquired by the Debtor and whether now or hereafter located on the Land

Property Location: Store No. 9906 - 4545 W. 95th St., Oak Lawn, Cook County, IL 60453

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:
[ ] Public-Finance Transaction [ ] Manufactured-Home Transaction [ ] A Debtor is a Transmitting Utility
6b. Check only if applicable and check only one box:
[ ] Agricultural Lien [ ] Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): [ ] Lessee/Lessor [ ] Consignee/Consignor [ ] Seller/Buyer [ ] Bailee/Bailor [ ] Licensee/Licensors
8. OPTIONAL FILER REFERENCE DATA:

Cook County Fixture Filing Obligor No. 0263165788 MM&M File No. 18263-100661

Store 9906 Cook County A00122465

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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

**Tri City Foods of Illinois, Inc.**

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) 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

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11.  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

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 application)

14. This FINANCING STATEMENT:

covers timber to be cut  covers as-extracted 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):

16. Description of real estate:

KIM-MP Multi-State, LLC  
14901 Quorum Drive, Suite 900, Dallas, TX 75254

SEE EXHIBIT A ATTACHED HERETO.

17. MISCELLANEOUS:

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Store No. 9906  
4545 W. 95th St.  
Oak Lawn, IL 60453

## EXHIBIT A

### LEGAL DESCRIPTION

#### EXHIBIT B TO ASSIGNMENT AND ASSUMPTION OF LEASE LEGAL DESCRIPTION OF THE PREMISES

Lot 1 in A.T. Maras Company Resubdivision of part of the East 1/2 of the Northwest 1/4 of Section 10, Township 37 North, Range 13, East of the Third Principal Meridian, according to the Plat thereof recorded November 11, 1993 as document no. 93946351, in Cook County, Illinois.

Real Estate Address: 4545 W. 95th Street, Oak Lawn, Illinois.

Permanent Real Estate Index Number 24-10-101-029.

Parcel ID No.:24-10-101-029-0000

Property of Cook County Clerk's Office