UNOFFICIAL C	OPY
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Doc#: 1434641103 Fee: \$42.00 RHSP Fee: \$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds

Date: 12/12/2014 01:12 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 ACKNOWI EDGEMENT TO: (Name and Address)	
Morris Manning & Martin	
Atlanta Financial Center #1600	
3343 Peachtree Road NE	
Atlanta, Georgia 303026	
∼ ,	

		TUE ABOVE	PDACE IS EOD EN	ING OFFICE USE O	v		
1 D	EBTOR'S NAME: Provide or o Debtor name (1a or 1b) (use exact, full name						
na	me will not fit in line 1b, leave all f, terr I blank, check here and provide the Inc	fividual Debtor information in item 10 of the	I'll OI the Debtor's name Einanning Statement &	e); it any part of the indiv	dual Debtor's		
	1a. ORGANIZATION'S NAME	InfoCol People Info(matter) To of the	r manding Statement A	adelidum (Form OCC IA	u)		
OR	Tri City Foods of Illinois, Inc.						
OIL	Ib. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL	NAME(S)/INITIAL(S)	SUFFIX		
Ic. M	AILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
441	5 Highway 6	Sugar Land	TX	77478	USA		
nai OR	me will not fit in line 2b, leave all of item 2 blank, check here and privide the Ind 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME	ividual Debtor information in item 10 of the			SUFFIX		
2c. MA	ILING ADDRESS	СП	STATE	POSTAL CODE	COUNTRY		
3. SE	CURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED I	PARTY): Province only one Secured Party in	ame (3a or 3b)		<u> </u>		
OR	3a. ORGANIZATION'S NAME WELLS FARGO BANK, NATIONAL ASSOCIATION, as Administrative Agent						
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL N'AME	ADDITIONAL	NAME(S)/INITIAL(S)	SUFFIX		
	ILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
170	0 Lincoln St. 3 rd Floor, MAC C7300-033	Denver	co	80203-4500	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. 305 - 10170 W Grand Ave., Franklin Park, Cook County, IL 60[3]

Check only if applicable and check only	y one box: Collateral is held	in a Trust (see UCC1Ad, item 17 ar	nd Instructions) 🔲 being	ng administered by a Dece	ident's Personal Representative
6a. Check only if applicable and check or	nly one box;		6b. Cr	eck <u>only</u> if applicable and	check <u>only</u> one box:
Public-Finance Transaction	Manufactured-Home Trans	action A Debtor is a Tra	nsmitting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if app	licable): Lesses/Lessor	Consignee/Consignor	Seller/Buyer	Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA				<u></u>	

International Association of Commercial Administrators (IACA)

FILING OFFICE COPY -UCC FINANCING STATEMENT (FORM UCC1) (Rev. 04/20/11)

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UC	C FINANCING STATEMENT ADDENDUM	[
FOLI	OW INSTRUCTIONS					
	AME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if I cause Individual Debtor name did not fit, check here	ine 1b was left blank				
	9a. ORGANIZATION'S NAME					
	Tri City Foods of Illinois, Inc.		- -			
OR	96. INDIVIDUAL'S SURNAME					
	FIRST PERSONAL NAME					
	ADDITIONAL ,4AS.=(,3)/INITIAL(\$)	SUFFIX				
			THE ABOVE SP	ACE IS EOR E	ILING OFFICE USE O	MI V
10. [DEBTOR'S NAME: Provide (1" a or 10b) only one additional Debtor name or D	ebtor name that did not fit in	line 1b or 2b of the Fir	ancing Stateme	nt (Form UCC1) (use ex	act, full name;
	to not ornit, modify, or abbreviate any per or the Debtor's name) and enter the mail 10a. ORGANIZATION'S NAME	ing address in line 10c				<u> </u>
OR	10b. INDIVIDUAL'S SURNAME				<u></u>	
	INDIVIDUAL'S FIRST PERSONAL NAME					
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				 	SUFFIX
40- 1	AN MO APPECO	1 000		· - · · · · · · · · · · · · · · · · · ·		
IUC, IV	AILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
11.	ADDITIONAL SECURED PARTY'S NAME OF ASSIGNOR SE	CUF ED FARTY'S NAME	Provide only one n	ame (11a or 11t))	
	11a. ORGANIZATION'S NAME					
OR	11b. INDIVIDUAL'S SURNAME	FIRST ERSONAL N	IAME	ADDITIONAL	NAME(S)INITIAL(S)	SUFFIX
11c. N	AILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
		9				
12. A	DDITIONAL SPACE FOR ITEM 4 (Collateral):		Cler	<u> </u>	 	<u></u>
			0.			
				2)		
					Sc.	i
13.	This F(NANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if application)	14. This FINANCING STA			7 2	
15. Na	time and address of a RECORD OWNER of real estate described in item 16	covers timber to		as-extracted coll	ateral 🔀 🗈 filed as	a fixture filing
(ii	Debtor does not have a record interest):		•			
		SEE EXHIBIT A ATTACHED HERETO.				
	er King Corporation					
3303	Blue Lagoon Drive, Miami, Florida 33126					
17. MI	SCELLANEOUS:			·	 	

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Store No. 305 10170 W Grand Ave. Franklin Park, IL 60131

EXHIBIT "A" BK# 305 LEGAL DESCRIPTION

LOTS 6, 7, 8, 9, 10, AND 11 IN BLOCK 13 IN THE 4TH ADDITION TO FRANKLIN CARK, A SUBDIVISION OF THAT PART OF THE EAST 1/2 OF THE NORTH WEST 1/4 LYING NORTH OF THE CENTER LINE OF GRAND AVENUE IN SECTION 28, TOWNSHIP 40 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, CILINOIS Of Coot County Clert's Office

Parcel ID No.:12-28-128-029-0 100