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C FINANCING STATEMENT		Date, 14		rg: 1 01 3	
LOW INSTRUCTIONS					
NAME & PHONE OF CONTACT AT FILER (optional) Frederick C.C. Boyd, III, Esq. 404/23:	3-7000				
E-MAIL CONTACT AT FILER (optional)					
SEND ACKNOWLEDGMENT TO: (Name and Address)					
Frederick C.C. Boyd, III, Esq.					
Mor is Wanning & Martin, LLP					
1600 Atlanta Financial Center 3343 Peacitre Road, NE					
Atlanta, GA 203/ 6	<u> </u>		ING ACCION NOC	ONLY	
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DEBTOR'S NAME: Provide unb on Debtor name (1a or 1b) (use exact,	full name; do not omit, modify, or abbreviate ar ide the Individual Debtor information in item 10	ny pari of the Deblo) of the Financing S	r s name); ii any part oi me n tatement Addendum (Form U	CC1Ad)	
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	CITY	STATE	POSTAL CODE	COUNTRY	
MAILING ADDRESS	Chicago	n.	60641	USA	
00 W. Irving Park Road		ny part of the Dahl-	or's name); if any part of the li	ndividual Debtor's	
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use c. ar., name will not fit in line 2b, leave all of Item 2 blank, check here and power	full name; do not omit, modify, or abbreviate a wide the Individual Debtor information in Item 10	O of the Financing S	Statement Addendum (Form L	JCC1Ad)	
2a. ORGANIZATION'S NAME					
2b. INDIVIDUAL'S SURNAME	FI (ST /ERSONAL NAME	ADDITI	ONAL NAME(S)/INITIAL(S)	SUFFIX	
	CITY	STATE	POSTAL CODE	COUNTRY	
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	SECURED PARTY): Provide only on Secured	Party name (3a or	3b)		
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S					
3a. ORGANIZATION'S NAME	()				
BANK OF AMERICA, N.A.	<u> </u>	ADDIT	IONAL NAME(S)/INITIAL(S)	SUFFIX	
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3a. ORGANIZATION'S NAME BANK OF AMERICA, N.A. 3b. INDIVIDUAL'S SURNAME	<u> </u>	STATE	POSTAL CODE	COUNTRY	
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3a. ORGANIZATION'S NAME BANK OF AMERICA, N.A. 3b. INDIVIDUAL'S SURNAME MAILING ADDRESS 000 Southside Blvd, FL 9-100-03-17	FIRST PERSONAL NAME	STATE	POSTAL CODE	COUNTRY	
BANK OF AMERICA, N.A. 3b. INDIVIDUAL'S SURNAME MAILING ADDRESS 000 Southside Blvd, FL 9-100-03-17 COLLATERAL: This financing statement covers the following collateral:	FIRST PERSONAL NAME CITY Jacksonville	STATE FL	POSTAL CODE 32203-0329	COUNTRY	
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NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if lin because Individual Debtor name did not fit, check here	e 1b was left blank				
9a, ORGANIZATION'S NAME					
SEJUL DONUTS, INC.					
Bb. INDIVID: 4.CS BURNAME	<u> </u>				
		<u> </u>			
FIRST PERSONAL NAME	(OUTTIV	<u> </u>			
ADDITIONAL NAME (2) (S)	SUFFIX	THE ABOVE	SPACE IS	FOR FILING OFFICE U	SE ONLY
DEBTOR'S NAME: Provide (10s or 1 lb) only one additional Debtor name or 0 do not omit, modify, or abbreviate any or that the Debtor's name) and enter the mail	eblor neme that did not fit li	n line 1b or 2b of the F	Inancing St	atement (Form UCC1) (use e	xact, full name
10a. ORGANIZATION'S NAME					
10b. INDIVIDUAL'S SURNAME		,,			
INDIVIDUAL'S FIRST PERSONAL NAME					
0/_					SUFFIX
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					DOUBLEDY.
: MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO	OR SECURED PART	Y'S NAME: Provide	only <u>one</u> กะ	nne (11a or 11b)	
11a, ORGANIZATION'S NAME	1//				Tanadani.
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL JAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
: ADDITIONAL SPACE FOR ITEM 4 (Collateral):					
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Exhibit "A"

Legal Description

3843 N. Cicero, Chicago, Illinois 60641

LOT 23 AND THE SOUTH 1/2 OF LOT 22 IN BLOCK 2 IN GROSS' MILWAUKEE AVENUE ADDITION TO CHICAGO, A SUDDIVISION IN THE WEST 1/2 OF THE NORTH WEST 1/4 OF SECTION 22, TOWNSHIP 40 NORTH, RANGE 13 LAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. Of Coot County Clark's Office