

UNOFFICIAL COPY



UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

Doc#: 1502913023 Fee: \$40.00
RHSP Fee:\$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 01/29/2015 09:59 AM Pg: 1 of 2

A. NAME & PHONE OF CONTACT AT FILER (optional)
WORLD FUEL SERVICES INC DBA TEXOR PETROLEUM
B. E-MAIL CONTACT AT FILER (optional)
KELLY.ALLEN@CARTERENERGY.COM
C. SEND ACKNOWLEDGMENT TO: (Name and Address)
WORLD FUEL SERVICES INC DBA TEXOR
PETROLEUM
PO BOX 29106
SHAWNEE MISSION KS 66201
913-643-2247

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
GARFIELD MOBIL INC.,
OR
1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
48 E GARFIELD BLVD CHICAGO IL 60615 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
OR
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
WORLD FUEL SERVICES INC DBA TEXOR PETROLEUM
OR
3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
PO BOX 29106 SHAWNEE MISSION KS 66201 USA

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

SECURITY INTEREST IN ALL OPERATIONAL IMPROVEMENTS, MADE AT PREMISES IN CONNECTION WITH IMAGE REQUIREMENTS AS STATED IN PROMISSORY NOTE DATED 11/07/2013 IN THE AMOUNT OF \$40,000.00. ALL INVENTORIES, ALL FIXTURES AND ALL PERSONAL PROPERTY BETWEEN WORLD FUEL SERVICES INC. DBA TEXOR PETROLEUM AND GARFIELD MOBIL.,

Handwritten notations: S 7, P 2, S H, M M, SC 7, INT 91

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/Licensor

8. OPTIONAL FILER REFERENCE DATA:
GARFIELD MOBIL

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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

GARFIELD MOBIL 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 applicable)

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):

**GARFIELD MOBIL INC.,
48 E GARFIELD BLVD
CHICAGO IL 60615**

16. Description of real estate:

**LOT 3 IN RESUBDIVISION OF LOTS 23,24,AND 25 IN BLOCK 2
IN COBURN'S ADDITION TO CHICAGO,BEING A
SUBDIVISION OF THE SOUTH 598.25 FEET OF THAT PART OF
THE SOUTHEAST 1/4OF THE SOUTHEAST 1/4 LYING EAST
OF C.R.I. AND P. RAIL ROAD SECTION 9 TOWNSHIP 38
NORTH,RANGE 14 EAST OF THE THIRD PRINCIPAL
MERIDIAN,IN COOK COUNTY,ILLINOIS
PIN# 20-09-422-080-0000**

17. MISCELLANEOUS: