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FOLLOW INSTRUCTIONS						
A. NAME & PHONE OF CONTACT AT FILER (optional)		16 0 41	6048			
Corporation Service Company 1-800-858-6 B. E-MAIL CONTACT AT FILER (optional)	5294	Doc#: 1604	116048 Fee: \$42	.00		
SPRFiling@cscinfo.com		PHSP Fee:\$9.0	O LILLY 1 Age 4.			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		Karen A.Yaibro	ugh monder of Deeds			
111000150 ones		Cook County H	ecorder of Deeds 16 02:44 PM Pg: 1 o	f 3		
111032153 - 380920	\neg	Date: 02/10/20	10 0=			
Urban Partnership Bank 7936 S. Cottage Grove Avenue	' [
Chicago, Illinois 600:9						
Attn: Post Closing-Cuerations Center	Filed In: Illinois					
	(Cook)					
1. DEBTOR'S NAME: Provide with 90.9 Debtor name (1a or 1b) (use ex- name will not fit in line 1b, leave out of it are a blank, check here and it 1a. ORGANIZATION'S NAME FOR Death 1.000	act full name; do not a li	THE ABOVE SPACE IS	FOR FILING OFFICE US	E ONLY		
and in the state of the state o	provide the Individual Debtor informat	abbreviate any part of the De	btor's name); if any part of the	Individual Debt		
1a. ORGANIZATION'S NAME FC Realty L'C Series 7519	9 S Essex	of the Financin	Statement Addendum (Form	UCC1Ad)		
OR 1b. INDIVIDUAL'S SURNAME	- - 5507					
THE SOUTHWINE	FIRST PERSONAL NAME	ADDI	FIONAL NAME(S)/INITIAL(S)			
MAILING ADDRESS 1266 N. Wood Street, Unit 1			TOTAL TANNE(S) MINITIAL(S)	SUFFIX		
	Chicago	STAT		COUNTRY		
DEBTOR'S NAME: Provide only one Debtor name (2) - 0.00	Chicago	IL	60622	USA		
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use e.ar name will not fit in line 2b, leave all of item 2 blank, check here and pr	f in name; do not omit, modify, or a	bbreviate any part of the Deb	tor's name): if any part of the	-4" 11 1 1		
2a. ORGANIZATION'S NAME	o ide he individual Debtor informatio	n in item 10 of the Financing	Statement Addendum (Form L	individual Debtoi JCC1Ad)		
	'					
2b. INDIVIDUAL'S SURNAME	FIRST PEPSON AL NAME		- -			
MAILING ADDRESS		ADDIT	ONAL NAME(S)/INITIAL(S)	SUFFIX		
	CITY	CTATE				
SECURED PARTY'S HAVE		STATE	POSTAL CODE	COUNTRY		
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S 3a. ORGANIZATION'S NAME Urban Partnership Bank	ECURED PARTY): Provide only one	Secured hardy power to				
1	——————————————————————————————————————	ity halle (3a or 3	D)			
3b. INDIVIDUAL'S SURNAME	FIRST DEPOS					
	FIRST PERSONAL NAME	/ ODITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
MAILING ADDRESS 7936 S. Cottage Grove Avenue	CITY	T		00.712		
	Chicago	STATE	POSTAL CODE	COUNTRY		
OLLATERAL: This financing statement covers the following collateral:			50619			
	ed, and wherever locate	ad including the				
I assets whether now owned or hereafter acquire that paper, contracts, documents, equipment, find operty, deposit accounts, money, supporting obligions and substitutions.	xtures, general intangib	los seeds	ot limited to, all acc	counts,		
"F" 'I UVDUSII di COllinie manair		ioo, accus incinir	Oppto in the second	vestment		
placements and substitutions relating to any of the	Te foregoing and all are	ai tort claims, all a	ccessions, addition	s,		
•	- 30mg and all pio	ceeds and produc	s of the foregoing			
}	FIDELITY VATIONAL O	- Gagini	2.5/			
•	FIDELITY NATIONAL T	TILE <u>77//00</u>	ω			
			(nel			
			TOFU			
k goly if applicable and check only one boy. Cally have [2]	Icon HCDA		7044			
k only if applicable and check column	(see UCC1Ad, item 17 and Instructio	0	by a Decedent's Personal Re	D/sco-tt		

111032153

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

1604116048 Page: 2 of 3

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UCC FINANCING STATEMENT ADDENDUM

9.	. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financin because Individual Debtor name did not fit, check here	Statement if line 45	7			
	The state of the s	o occurrent, if line to was left blank	ļ			
	9a. ORGANIZATION'S NAME		Į			
	FC Realty LLC Series 7519 S Essex					
OF	R					
	9b. INDIVIDUAL'S SURNAME					
	FIRST PERSONAL JAME					
	ADDITIONAL NAME(S)/INTTA L(S)	SUFFIX				
10.	DEBTOR'S NAME: Provide (10s of 10t) and		THE ABOV	E SPACE I	S FOR FILING OSSIC	
	DEBTOR'S NAME: Provide (10a (7 '0)) only one additional De do not omit, modify, or abbreviate any part of the "Jebtor's name) and 10a. ORGANIZATION'S NAME	btor name or Debtor name that did not fit in denter the mailing address in line 10c	ine 1b or 2b of the	Financing St	atement (Form UCC1) (us	e exact, full n
OR						
	10b. INDIVIDUAL'S SURNAME					
	INDIVIDUAL'S FIRST PERSONAL NAME	· O				
-	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	0/		· <u>-</u> -		-
0c.	MAILING ADDRESS	TO				SUFFIX
		СІТҮ	-	STATE	POSTAL CODE	COUNTRY
1. [ADDITIONAL SECURED PARTY'S NAME OF A	ASSIGNOR SECURE OF ARTY'S		i i		
	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONA	L NAME(S)/INITIAL(S)	SUFFIX
c. N	MAILING ADDRESS	СІТУ	<u></u>	STATE P	OSTAL CODE	
. AE	DDITIONAL SPACE FOR ITEM 4 (Collateral):			4	DO LATE CODE	COUNTRY
	,			20		
					. (2)	
1.7 1	This FINANCING STATEMENT				O	
	This FINANCING STATEMENT is to be filed [for record] (or recorded REAL ESTATE RECORDS (if applicable)	i interview	:		6	
Nam	This FINANCING STATEMENT is to be filed [for record] (or recorded REAL ESTATE RECORDS (if applicable) are and address of a RECORD OWNER of real estate described in item ebtor does not have a record interest):	covers timber to be cut 16	covers as-ext		Q	ture filing
Nam	ie and address of a RECORD CHAPTER	covers timber to be cut	covers as-ext		C	ture filing
Nam	ie and address of a RECORD CHAPTER	covers timber to be cut 16	covers as-ext		C	ture filing
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Vam	ie and address of a RECORD CHAPTER	covers timber to be cut 16	covers as-ext		C	ture filing
Vamif De	ie and address of a RECORD CHAPTER	covers timber to be cut 16	covers as-ext		C	ture filing

1604116048 Page: 3 of 3

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EXHIBIT A

LEGAL DESCRIPTION

LOTS 8 AND 9 IN BLOCK 2 BEING IN SOUTH SHORE PARK, A SUBDIVISION OF THE WEST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 30, TOWNSHIP 38 NORTH, RANGE 15, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

PERMANENT INDEX NUMBER:

RMA.

1-30-302-095-to.

PROPERTY ADDRESS:

7519 S. Essex Avenue Chicago, Illinois

Contract C