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UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294					
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com)oc#: 16(BHSP Fee:\$9	0 6844047 Fee: \$4 .00 RPRF Fee: \$1.00	42.00
C. SEND ACKNOWLEDGMENT TO: (Name and Address)			aren A.Yarbi		,
112792700 - 396790		0	ook County	Recorder of Deeds 016 03:04 PM Pg: 1	of 3
	Filed In: Illinois (Cook)	THE A⊾			
				r's name); if any part of the Ir atement Addendum (Form U	
1a. ORGANIZATION'S NAME					
or 15. INDIVIDUAL'S SURNAME Washington	FIRST PERSONA Dane	FIRST PERSONAL NAME		ONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 16932 S Kimbark Ave.	CITY South Holla	and	STATE	POSTAL CODE 60473	COUNTRY
DEBTOR'S NAME: Provide only or e Debtor name (2a or 2b) (use exact name will not fit in line 2b, leave all of item 2 blank, check here and provide ORGANIZATION'S NAME	air name; do not omit, i de (h) Individual Debto	nodify, or abbreviate any r information in item 10 o	part of the Debto of the Financing St	r's name); if any part of the In atement Addendum (Form Ud	dividual Debtor's CC1Ad)
OR 2b. INDIVIDUAL'S SURNAME Washington	FIRST PERSONA Diane	LNAME	ADDITIC	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
2c. MAILING ADDRESS 16932 S kimbark Ave.	South Holla	ind	STATE	POSTAL CODE 60473	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SE 3a. ORGANIZATION'S NAME MICROF	CURED PARTY): Pro	ride only <u>one</u> Serured Pa	rty name (3a or 3i	5)	
OR 36. INDIVIDUAL'S SURNAME	FIRST PERSONA	LNAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
36. MAHLING ADDRESS P.O. Box 70085	Albany		ST. N	POSTAL CODE 31707	COUNTRY
4. COLLATERAL: This financing statement covers the following collateral: All of the Debtor's right, title and interest, now exis certain Lease No. 35746 between Debtor as Lesse other claims and rights to payment and chattel pay relating to the foregoing, and (iv) any other propert of Lessee's interest in the Equipment. For the purpos in item 12 of the UCC1Ad attached hereto, and includattachments, improvements and accessions theret PURPOSES ONLY. THE PARTIES CONSIDER TIRIGHT TO SELL OR PLEDGE THE EQUIPMENT.	ee and Microf, per arising out ty or rights to vees of this finar des all substitute. THIS FILINALS TRANSAC	LLC as Lessor, of such Equipmonth the Lessen nations statement, ations, replacem G IS FOR PRECETION TO BE A	(ii) all insurent, (iii) all ent, (iii) all enty be of enty. "Equipments, upgrace CAUTIONA	rance, warranty, rebooks, records and reco	ental and d proceeds by reason described and ATIONAL
5. Check only if applicable and check only one box: Collateral is held in a Tru 6a. Check only if applicable and check only one box	st (see UCC1Ad, item	17 and Instructions)		red by a Decedent's Persona f applicable and check <u>only</u> o	
Public-Finance Transaction Manufactured-Home Transaction		Transmitting Utility	Agricult	ural Lien Non-UCC	Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor 8. OPTIONAL FILER REFERENCE DATA:	Consignee/Consigno	r Seller/Buy	er Ba	lee/Bailor Licens	11270270

1606844047 Page: 2 of 3

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UCC FINANCING STATEMENT ADDENDUM

10c. MAILING ADDRESS CIT STATE POSTAL CODE CO 11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED ARTY'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) SURNAME	
96. ORGANIZATION'S NAME 96. INDIVIDUAL'S SURNAME Washington FIRST PERSONAL AME Dane ADDITIONAL NAME(SJIN TIAL'S) THE ABOVE SPACE IS FOR FILING OFFICE USE 10. DEBTOR'S NAME. Provide (10a.o., 10a) only gate additional Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact do not orbit, modify, or abbreviate any part of the coptor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONA. NAME INDIVIDUAL'S ADDITIONAL NAME(SJINITIAL'S) 10c. MAILING ADDRESS CIT. STATE POSTAL CODE CO 11 ADDITIONAL SECURED PARTY'S NAME of ASSIGNOR SECURED FARTY'S NAME. Provide only gate name (11a or 11b) 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME: ADDITIONAL NAME(SJINITIALIS) SU	
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OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SURNAME	
FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SL	
11c. MAILING ADDRESS CITY STATE POSTAL CODE CO	JFFIX
	DUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	•
2014 PAYNE Furnace M# PG92SCS48080B S# 2914A50569	
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	e 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: PIN: 29-23-405-006-0000. See attached Exhibit.	-
17. MISCELLANEOUS:	

UNOFF Level File OPY

LOT 50, IN MACCARTS 2ND ADDITION TO SOUTH HOLLAND, BEING A SUBDIVISION OF PART OF THE SOUTH 25 ACRES OF THE WEST ½ OF THE SOUTHEAST ¼ OF SECTION 23, TOWNSHIP 36 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN ACCORDING TO PLAT THEREOF REGISTERED IN THE OFFICE OF THE REGISTRAR OF THE EST COOK COUNTY, ILLINOIS, ON APRIL 5, 1968, AS DOCUMENT NUMBER 2381179, IN COOK COUNTY, ILLINOIS.

