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Karen A. Yarbrough

Cook County Recorder of Deeds

Date: 04/29/2016 02:22 PM Pg: 1 of 3

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Anthony J. Barwick, Esq. (919) 743-7340
B. E-MAIL CONTACT AT FILER (optional) tony.barwick@klgates.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Anthony J. Barwick, Esq. K&L Gates LLP PO Box 17647 Raleigh, NC 27619-7047

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 TowerCo IV LLC	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 5000 Vallestone Drive, Suite 200	CITY Cary	STATE NC	POSTAL CODE 27519	COUNTRY 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	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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 Fifth Third Bank, as Administrative Agent	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 2501 Blue Ridge Road	CITY Raleigh	STATE NC	POSTAL CODE 27607	COUNTRY USA

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

All assets of the Debtor now owned or at any time hereafter acquired or in which the Debtor now has or at any time in the future may acquire any interest and all proceeds thereof in connection with Debtor's leasehold interest in the real property described in the attached Exhibit A.

Yes
 No
 P
 S
 N
 N
 S
 E
 INT

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
 Agricultural Lien
 Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:
Cook County, Illinois

International Association of Commercial Administrators (IACA)

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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 TowerCo IV LLC	
OR	
9b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

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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		SUFFIX
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):

See Exhibit A

16. Description of real estate:

See Exhibit A

17. MISCELLANEOUS:

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Exhibit A

BEING all those certain tracts or parcels of land located in Cook County, Illinois and being more particularly described as follows:

Parcel 1 (Site ILO285):

Record Owner:

**North Suburban Young Men's Christian Association, Inc.
2705 Techny Road, Northbrook, IL 60062**

A part of Lot 12, School Trustee's Subdivision, and being located in the Northwest Quarter (NW 1/4) of the Southwest Quarter (SW 1/4), Section Sixteen (16), Township Forty-two (42) North, Range Twelve (12) East, Third Principal Meridian, in the Village of Northbrook, Cook County, Illinois containing 1,951 square feet (0.044 acres) of land and being described by: Commencing at the Northwest corner of Lot 12 of said School Trustee's Subdivision; thence S89°-52'-51"E 642.77 feet along the North line of said Lot 12; thence S00°-07'-09"W 383.77 feet to the point of beginning; thence S00°-00'-00"W 76.00 feet; thence N90°-00'-00"W 25.67 feet; thence N00°-00'-00"E 76.00 feet; thence S90°-00'-00"E 25.67 feet to the point of beginning, being subject to any and all easements and restrictions of record. Tax Parcel Number 04-16-300-008-0000.

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