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Doc#: 1617204000 Fee: \$64.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 06/20/2016 10:44 AM Pg: 1 of 3

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-8	358-5294
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address))
115948470 - 380929	
Urban Partnersnip Dank	•
7936 S. Cottage Gr⊳ve Avenue	
Chicago, Illinois 60619	Filed In: Illinois
Attn: Post Closing-Operation Center	(Cook)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONL	OFFICE USE ON	FOR FILING	E IS	SPACE	E ABOVE	T
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Chicago, Illinois 60619 F Attn: Post Closing-Opera (on Center	iled In: Illinois (Cook)			
Aut. Fost Crossing-Oper 2 to 17 Control	· · · · · · · · · · · · · · · · · · ·	OVE SPACE IS FO	R FILING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide only one Eablor name (1s or 1b) (use exact, name will not fit in line 1b, leave all of item 1 blank check here and provi	full name; do not omit, modify, or abbreviate de the Individual Debtor information in Item	any part of the Debtor 10 of the Financing St	's name); if any part of the Ir Itement Addendum (Form U	ndividual De CC1Ad)
1a. ORGANIZATION'S NAME 79 Properties, 1/20				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 38993 Swordfish Common	GITY Fremont	STATE CA	POSTAL CODE 94536	COUNT
2. DEBTOR'S NAME: Provide only one Debtor name (2e or 2b) (use exact.				
name will not fit in line 2b, leave all of item 2 blank, check here and prov	de the Ind Adual Debtor information in item	IV OI UNE FINEIRANG 30	Rement Addendum (Form O	
	0,			
2b. INDIVIDUAL'S SURNAME	FIRST PERSON IN IN ME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNT
				COOM
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE OF ASSIGNOR SE	CURED PARTY): Provide only one Securi	J Purty name (3a or 3b)	COOK
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE OF ASSIGNOR SE 34. ORGANIZATION'S NAME Urban Partnership Bank	CURED PARTY): Provide only one Security	d Purty name (3a or 3t)	COON
	ECURED PARTY): Provide only one Security	0	NAL NAME(SYNITIAL(S)	
34 ORGANIZATION'S NAME Urban Partnership Bank		0		SUFFIX

4. COLLATERAL: This financing statement covers the following collateral All assets whether now owned or hereafter acquired, and wherever located, including, but not limited to all accounts, chattel paper, contracts, documents, equipment, fixtures, general intangibles, goods, instruments, invertory, investment property, deposit accounts, money, supporting obligations, and commercial tort claims, all accessions, additions, replacements and substitutions relating to any of the foregoing and all proceeds and products of the foregoing

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:	6b. 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/Buy	er Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: : IL - Cook County	115948470

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NAME OF FIRST DEBTOR: Same as line 1a or 1b or because individual Debtor name did not fit, check here		ras left blank			
88. ORGANIZATION'S NAME					
79 Properties, LLC					
9b. INDIVIDUAL'S SUF. NA. 1E					
FIRST PERSONAL NAMP.					
ADDITIONAL NAME(\$)/INI (IAL(3)		SUFFIX			
DEBTOR'S NAME: Provide (10a or 10b) only goe a				IS FOR FILING OFFICE I Statement (Form UCC1) (use	
do not omit, modify, or abbreviate any part of the Debtor 10a. ORGANIZATION'S NAME	's name) and enter the mailing ad-	dress in line 10c			
Ass. DISTRIBUTE SALVENIANE				.,	
10b. INDIVIDUAL'S SURNAME	Ċ				
INDIVIDUAL'S FIRST PERSONAL NAME	OZ				
INDIVIDUAL'S ADOITIONAL NAME(S)/INITIAL(S)	- 7	7			SUFFIX
MAILING ADDRESS	СІТҮ	- 0,	STATE	POSTAL CODE	COUNTR
ADDITIONAL SECURED PARTY'S NAME	M ASSIGNOR SE	CURED PAPIN'S	NAME: Provide only one	ame (11a or 11b)	I
11a. ORGANIZATION'S NAME	-	D		· · · · · · · · · · · · · · · · · · ·	- I Courter
	-	CURED PAPIN'S		name (11a or 11b)	SUFFIX
11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME	-	D		· · · · · · · · · · · · · · · · · · ·	
11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS	FIRST	D	ADDITI	ONAL NAME(S)/INITIAL(S)	SUFFIX
11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS	FIRST	D	ADDITI	ONAL NAME(S)/INITIAL(S)	
11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS	FIRST	D	ADDITI	ONAL NAME(S)/INITIAL(S)	
11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS	FIRST	D	ADDITI	ONAL NAME(S)/INITIAL(S)	
11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS	FIRST	D	ADDITI	ONAL NAME(S)/INITIAL(S)	
11s. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for reco	CITY	PERSONAL NAME	STATE U	POSTAL CODE	COUNTR
11s. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for rec REAL ESTATE RECORDS (if applicable))	CITY CITY ord] (or recorded) in the	PERSONAL NAME	STATE	POSTAL CODE	COUNTR
11s. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for rec REAL ESTATE RECORDS (if applicable))	ord] (or recorded) in the described in item 16 16. Dec	PERSONAL NAME FINANCING STATEME covers timber to be cut	STATE U NT: covers as-extracted	POSTAL CODE	COUNTR
11s. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for rec REAL ESTATE RECORDS (if applicable))	ord] (or recorded) in the described in item 16 16. Dec	PERSONAL NAME FINANCING STATEME covers timber to be cut cription of real estate:	STATE U NT: covers as-extracted	POSTAL CODE	COUNTR
11s. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for rec REAL ESTATE RECORDS (if applicable)) Name and address of a RECORD OWNER of real estate	ord] (or recorded) in the described in item 16 16. Dec	PERSONAL NAME FINANCING STATEME covers timber to be cut cription of real estate:	STATE U NT: covers as-extracted	POSTAL CODE	COUNTR
11s. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed (for rec REAL ESTATE RECORDS (if applicable))	ord] (or recorded) in the described in item 16 16. Dec	PERSONAL NAME FINANCING STATEME covers timber to be cut cription of real estate:	STATE U NT: covers as-extracted	POSTAL CODE	COUNTR
11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral):	ord] (or recorded) in the described in item 16 16. Dec	PERSONAL NAME FINANCING STATEME covers timber to be cut cription of real estate:	STATE U NT: covers as-extracted	POSTAL CODE	COUNTR

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EXHIBIT A TO UCC FINANCING STATEMENT

<u>Parcel 1</u>: Lot 23 in the Resubdivision of Lots 1 to 11 inclusive and Lots 25 to 44 inclusive in Block 90 in Cornell, in the West 1/2 of the Southwest 1/4 of Section 26, Township 38 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois

<u>Parcel 2</u>: Lot 24 in Block 90 in Cornell, being a Subdivision in Section 26 and 35, Township 38 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois

Address:

932 - 944 E. 79th Street Chicago, Illinois 60619

PIN:

20-26-320-018-0000 20-26-320-019-0000