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1620219113

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

Doc#: 1620219113 Fee: \$42.00
RHSP Fee:\$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 07/20/2016 03:31 PM Pg: 1 of 3

A. NAME & PHONE OF CONTACT AT FILER (optional) STEPHANIE SWARTZ
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) UNISEARCH - UNI11548 1780 BARNES BLVD. S.W., BLDG. G TUMWATER, WA. 98512-0410 UCC1-168330 COOK COUNTY

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 1b blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME TUSHIYA, LLC	OR			
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 4442 N BROADWAY	CITY CHICAGO	STATE IL	POSTAL CODE 60640	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	OR			
2b. INDIVIDUAL'S SURNAME THOMAS	FIRST PERSONAL NAME RAMON A	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS 4442 N BROADWAY	CITY CHICAGO	STATE IL	POSTAL CODE 60640	COUNTRY USA

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 LOCAL INITIATIVES SUPPORT CORPORATION	OR			
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 501 7TH AVENUE, 7TH FLOOR	CITY NEW YORK	STATE NY	POSTAL CODE 10031	COUNTRY USA

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

ALL OF DEBTOR'S PRESENTLY OWNED AND EXISTING AND HEREAFTER ACQUIRED AND ARISING (A) ACCOUNTS, WHETHER OR NOT EARNED BY PERFORMANCE, CHATTEL PAPER AND INSTRUMENTS; (B) INVENTORY; (C) GENERAL INTANGIBLES; (D) FIXTURES; (E) EQUIPMENT; (F) REPLACEMENTS, BETTERMENTS, SUBSTITUTIONS AND RENEWALS OF, AND ADDITIONS TO, ANY OF THE COLLATERAL; (G) PROCEEDS, INCLUDING, WITHOUT LIMITATION, ALL CONDEMNATION OR INSURANCE PROCEEDS, ARISING OUT OF OR WITH RESPECT TO THE COLLATERAL OR THE LAND; AND (H) PRODUCTS OF THE COLLATERAL.

5. Check only if applicable and check only one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check only if applicable and check only one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility	6b. Check only if applicable and check only one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessor/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailor/Bailor <input type="checkbox"/> Licensee/Licensor	

8. OPTIONAL FILER REFERENCE DATA:
UCC1-1683301 80260650-03 COUNTY

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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 <input type="checkbox"/>	
9a. ORGANIZATION'S NAME	
TUSHIYA, 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
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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
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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):

16. Description of real estate:

SEE ATTACHED EXHIBIT B

17. MISCELLANEOUS:

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EXHIBIT B

THE BUILDING

LOT 4 OF WILSON YARD, BEING A SUBDIVISION IN THE NORTHEAST ¼ OF SECTION 17, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED SEPTEMBER 10, 2008 AS DOCUMENT NUMBER 0825416077, IN COOK COUNTY, ILLINOIS.

Premises Address: 1442 North Broadway, Chicago, IL

Premises Tax Identification Numbers: 14-17-217-037

Property of Cook County Clerk's Office