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Ä.	CC FINANCING STATEMENT LOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional)						
	Corporation Service Company 1-800-858-5294		Doo#: 1	00004	4004 m		
	E-MAIL CONTACT AT FILER (optional)		Doc#: 1623844064 Fee: \$46.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00 Karen A.Yarbrough				
	SPRFiling@cscinfo.com						
C.	SEND ACKNOWLEDGMENT TO: (Name and Address)		Cook Coun	ty Recor	der of Deeds		
ſ	 119861275 - 397580	-	Date: 08/25	/2016 02	2:39 PM Pg: 1 of 5		
1	Corporation Service Company	'			3		
	801 Adiai Stevensor Drive						
	Springfield, IL 62705 File	ed In: Illinois					
ı		(Cook)					
_					R FILING OFFICE USE C	****	
	DEBTOR'S NAME: Provide or all of ite 1 th ank, check here and and provide	I name; do not omit, m the Individual Debtor	odity, or abbreviate any part of information in item 10 of the F	inancing Sta	s name); it any part of the inc stement Addendum (Form UC	C1Ad)	
_	1a. ORGANIZATION'S NAME						
OR	16. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME		NAL NAME(S)/INITIAL(S)	SUFFIX	
	Adams	David		М	I		
Ç,	MAILING ADDRESS 9612 W Higgins Road, #1D	Rosemont		STATE IL	POSTAL CODE 60018	USA	
	DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact rull name will not fit in line 2b, leave all of item 2 blank, check here and provide and provide as ORGANIZATION'S NAME	name; do not omit, m thu Individual Debtor	odify, or abbreviate any part o information in item 10 of the F	f the Debtor inancing Sta	s name); if any part of the Ind atement Addendum (Form UC	tividual Debto CC1Ad)	
)R		Japan as soul	Land Control National Control				
,,,	2b. INDIVIDUAL'S SURNAME	FIRST PE (SO VAL	NAME	AUDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
C.	MAILING ADDRESS	CITY	7%	STATE	POSTAL CODE	COUNTRY	
3. 5	SECURED PARTY'S NAME (or NAME of ASSIGNEE OF ASSIGNOR SECTION OF S	URED PARTY): Prov	de only <u>one</u> Ser and Party nar	ne (3a or 3b)		
	, , , , , , , , , , , , , , , , , , , ,						
	, , , , , , , , , , , , , , , , , , , ,	FIRST PERSONAL	NAME	IADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
OR		FIRST PERSONAL CITY Providence	NAME	STATE	POSTAL CODE	SUFFIX COUNTRY USA	
DR Ic.	3b. INDIVIDUAL'S SURNAME MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral:	CITY	NAME	STATE	POSTAL CODE	COUNTRY	
R c.	MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remodel	CITY	NAME	STATE	POSTAL CODE	COUNTRY	
C C	MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remodel Demolition	CITY Providence		STATE P	POSTAL CODE 02903	COUNTRY	
c. C	3b. INDIVIDUAL'S SURNAME MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remodel Demolition install dust protection and floor protection to existin	Providence	to kitchen and on f	STATE P	POSTAL CODE 02903	COUNTRY	
R C C C	3b. INDIVIDUAL'S SURNAME MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remodel Demolition install dust protection and floor protection to existin Build dust protection air cleaner during construction	Providence	to kitchen and on f	STATE P	POSTAL CODE 02903 existing riper. Use	COUNTRY USA	
R C C C -i B -i	MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remodel Demolition install dust protection and floor protection to existing suild dust protection air cleaner during construction remove cabinets, counters, plumbing to sink, floor	Providence ng rooms next n to remove du tile, drywall be	to kitchen and on f est in the air. Sehind cabinets for e	loors to	existing coer. Use	COUNTRY USA	
R C C C -i B -i W	MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remodel Demolition install dust protection and floor protection to existing Build dust protection air cleaner during construction remove cabinets, counters, plumbing to sink, floor wall behind sink, right side of door opening from the	Providence ng rooms next n to remove du tile, drywall be	to kitchen and on f est in the air. Sehind cabinets for e	loors to	existing coer. Use	COUNTRY USA	
DR C C -i E -i W -i	MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remodel Demolition install dust protection and floor protection to existing Build dust protection air cleaner during construction remove cabinets, counters, plumbing to sink, floor wall behind sink, right side of door opening from the move appliances & provide dust protection.	Providence ng rooms next n to remove du tile, drywall be	to kitchen and on f est in the air. Sehind cabinets for e	loors to	existing coer. Use	COUNTRY USA	
DR 36.	MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remodel Demolition install dust protection and floor protection to existing a construction and dust protection air cleaner during construction remove cabinets, counters, plumbing to sink, floor wall behind sink, right side of door opening from the move appliances & provide dust protection. remove all base molding.	Providence ng rooms next n to remove du tile, drywall be	to kitchen and on f est in the air. Sehind cabinets for e	loors to	existing coer. Use	COUNTRY USA	
DR -1 C C -1 E -1 W -1 II	MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remodel Demolition install dust protection and floor protection to existing stall dust protection air cleaner during construction remove cabinets, counters, plumbing to sink, floor wall behind sink, right side of door opening from the move appliances & provide dust protection. remove all base molding. installation	Providence ng rooms next n to remove du tile, drywall be	to kitchen and on f est in the air. Sehind cabinets for e	loors to	existing coer. Use	COUNTRY USA	
DR -1 C C -1 E -1 In -1	MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remodel Demolition install dust protection and floor protection to existing stall dust protection air cleaner during construction remove cabinets, counters, plumbing to sink, floor wall behind sink, right side of door opening from the move appliances & provide dust protection. remove all base molding. Install cabinets per layout.	Providence ng rooms next n to remove du tile, drywall be	to kitchen and on f est in the air. Sehind cabinets for e	loors to	existing for. Use o be updated, ceil ont of living room.	COUNTRY USA	
OR LOC C -i E -i V -i -i -i -i -i	MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remodel Demolition install dust protection and floor protection to existing stall dust protection air cleaner during construction remove cabinets, counters, plumbing to sink, floor wall behind sink, right side of door opening from the move appliances & provide dust protection. remove all base molding. Install cabinets per layout. Install Cambria counters	Providence ng rooms next n to remove du tile, drywali be	to kitchen and on f ist in the air. chind cabinets for e ie and casing on w	loors to	existing roor. Use on the updated, ceil ont of living room.	COUNTRY USA	
R C C C -i B -i W -i -i -i -i -i -i -i	MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remode! Demolition install dust protection and floor protection to existing suild dust protection air cleaner during construction remove cabinets, counters, plumbing to sink, floor wall behind sink, right side of door opening from the move appliances & provide dust protection. remove all base molding. Install cabinets per layout. Install Cambria counters Install Cambria counters Install mango MG817 glass lineal mosaic tile backs	Providence ng rooms next n to remove du tile, drywall be e kitchen, fram	to kitchen and on f ast in the air. whind cabinets for e are and casing on w	Policy to the stall of the stalled with	existing cor. Use to be updated, cell ont of living room.	COUNTRY USA	
OR 1. O C -i B -i V -i	MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remodel Demolition Install dust protection and floor protection to existing Build dust protection air cleaner during construction remove cabinets, counters, plumbing to sink, floor wall behind sink, right side of door opening from the move appliances & provide dust protection. remove all base molding. Install cabinets per layout. Install Cambria counters Install Cambria counters Install mango MG817 glass lineal mosaic tile backs Check only if applicable and check only one box: Collateral is held in a Trust	Providence ng rooms next n to remove du tile, drywali be	to kitchen and on fast in the air. Tand cabinets for eand casing on which the casing on which the casing on which the casing on the casing of	Postalled was administed with all administrations and administrations are seen as a second se	existing cor. Use to be updated, cell ont of living room. CCRDRE	COUNTRY USA	
DR C C -i B -i V -i	MAILING ADDRESS 15 Park Row West COLLATERAL: This financing statement covers the following collateral: Complete Kitchen Remode! Demolition install dust protection and floor protection to existing suild dust protection air cleaner during construction remove cabinets, counters, plumbing to sink, floor wall behind sink, right side of door opening from the move appliances & provide dust protection. remove all base molding. Install cabinets per layout. Install Cambria counters Install Cambria counters Install mango MG817 glass lineal mosaic tile backs	Providence ng rooms next n to remove du tile, drywall be e kitchen, fram	to kitchen and on fast in the air. Tand cabinets for eand casing on which the casing on which the casing on which the casing on the casing of	doors to electric tall in fro	existing cor. Use to be updated, cell ont of living room.	COUNTRY USA Clean ing light,	

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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 98. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME Adams FIRST PERSONAL AME David ADDITIONAL NAME(S)/IN (IAL S) SUFFIX М THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10L, coly 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 c. the better's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME SUFFIX INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) POSTAL CODE COUNTRY STATE 10c. MAILING ADDRESS ASSIGNOR SECURI:D FARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME ADDITIONAL NAME(S)/INITIAL(S) FIRST PERSONAL NAME SUFFIX 11b. INDIVIDUAL'S SURNAME POSTAL CODE COUNTRY STATE 11c. MAILING ADDRESS CITY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): -install Mango Crema Marfil gloss tile set in mortar, level floor if needed. -install wood base to match existing base. Plumbing -install new water lines, shut off valves sink strainers, and drain for sink. -reinstall dishwasher and fridge water lines. -install 2 circuits for code, GFCI outlets, LED lighting with dimmer under cabinets, all new switched & outlets standard 14. This FINANCING STATEMENT 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) covers as-extracted collateral is filed as a fixture filing covers timber to be cut 16. Description of real estate: 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest) See attached exhibit A. PARCEL ID #12-04-204-053-1004

17. MISCELLANEOUS:

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DLLOW INSTRUCTIONS		1		
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Stater because Individual Debtor name did not fit, check here	ment; if line 1b was left blank			
9a. ORGANIZATION'S NAME				
9b. INDIVIDUAL'S SURNAME				
Adams FIRST PERSONAL NIME		1		
David				
ADDITIONAL NAME(S)/IN (TAL S)	SUFFIX			
M ZO			IS FOR FILING OFFICE	
DEBTOR'S NAME: Provide (10a or 10b, or lay one additional Debtor in do not omit, modify, or abbreviate any partic, the subtor's name) and enter	ame or Debtor name that did not fit in ar the mailing address in line 10c	n line 1b or 2b of the Financing	Statement (Form UCC1) (us	e exact, full nam
10a. ORGANIZATION'S NAME	y ste maning accress in the tes			
0.0				
10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	-0 Z			SUFFIX
	τ_{\circ}			
c. MAILING ADDRESS	CIT	STATE	POSTAL CODE	COUNTRY
	SIGNOR SECURI D FARTY	"S NAME: Provide only one	name (11a or 11b)	
11a. ORGANIZATION'S NAME				
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITI	ONAL NAME(S)/INITIAL(S)	SUFFIX
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral): color white, ivory, or light almond.		0.		
add switch for disconnect for dishwasher.		0.		
Framing			U _x	
remove wall behind sink & side wall.			IF.	
block wall for installation of drywall.			(C)	
frame existing opening w/2x4 to match existing	drywall.		0	
This FINANCING STATEMENT is to be filed [for record] (or recorded)) in the 14. This FINANCING STAT	EMENT:		
		cut Covers as-extracted	colleteral is filed as	a fixture filing
REAL ESTATE RECORDS (if applicable)	covers timber to be		Conacolar	
			- control	
5. Name and address of a RECORD OWNER of real estate described in Item			- CONTROL - CONT	
5. Name and address of a RECORD OWNER of real estate described in Item			Constitution of the second	
5. Name and address of a RECORD OWNER of real estate described in Item				
5. Name and address of a RECORD OWNER of real estate described in Item				
Name and address of a RECORD OWNER of real estate described in Item				
5. Name and address of a RECORD OWNER of real estate described in Item				
Name and address of a RECORD OWNER of real estate described in Item				

1623844064 Page: 4 of 5

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NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing S because Individual Debtor name did not fit, check here	tatement; if line 1b was lo	eft blank				
9a. ORGANIZATION'S NAME			ı			
			!			
9b, INDIVIDUAL'S SURNAME Adams						
FIRST PERSONAL AME						
David						
ADDITIONAL NAME(S)/IN TIAI (S)		SUFFIX	THE ABOVE	SPACE	IS FOR FILING OFFICE	USE ONLY
DEBTOR'S NAME: Provide (10a or 10p) city one additional Deb do not omit, modify, or abbreviate any part or the Labtor's name) and	tor name or Debtor name enter the mailing addres	e that did not fit in s in line 10c	line 1b or 2b of the F	inancing S	statement (Form UCC1) (use	exact, full na
10a. ORGANIZATION'S NAME						
10b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL S FIRST PERSONAL NAME	0					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	7					SUFFIX
: MAILING ADDRESS	CIT).		STATE	POSTAL CODE	COUNT
ADDITIONAL SECURED PARTY'S NAME QL	ASSIGNOR SECU	RED PARTY	S NAME: Provide o	only <u>one</u> n	ame (11a or 11b)	
11a. ORGANIZATION'S NAME		1//				
11b. INDIVIDUAL'S SURNAME	FIRST PER	SONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
D. MAILING ADDRESS	CITY		0	STATE	POSTAL CODE	COUNT
. ADDITIONAL SPACE FOR ITEM 4 (Collateral): Painting			1	2	<u> </u>	<u> </u>
prime all new drywall & patches.				0.		
remove stucco from ceiling and prime.					ا المراد	
paint ceiling white.						
. This FINANCING STATEMENT is to be filed [for record] (or record	rded) in the 14. This FI	NANCING STATE	MENT:			
REAL ESTATE RECORDS (if applicable)		vers timber to be		extracted	collateral is filed as	a fixture filing
Name and address of a RECORD OWNER of real estate described in (if Debtor does not have a record interest):	item to to Descrip	ption or real estate	ı.			

1623844064 Page: 5 of 5

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ADAMS

Exhibit A;

THE FOLLOWING DESCRIBED REAL ESTATE SITUATED IN THE COUNTY OF COOK, STATE OF ILLINOIS, TO WIT:

UNIT ID AS DELINEATED ON SURVEY OF THE FOLLOWING DESCRIBED PARCEL OF REAL ESTATE (HEREINAFTER REFERRED TO AS PARCEL:) PART OF LOT 1 IN GRIZAFFI AND FALCONE EXECUTIVE ESTATES, BEING A SUBDIVISION IN THE NORTHEAST 1/4 OF SECTION 4, TOWNSHIP 40 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, WHICH SURVEY IS ATTACHED AS EXHIBIT "A" TO DECLARATION OF CONDOMINIUM MADE BY GIZAFFI AND FALCONE CONTRACTORS, INCORPORATED, RECORDED IN THE CFFICE OF THE RECORDER OF COOK COUNTY, ILLINOIS, AS DOCUMENT NUMBER 19882994, AND SUBSEQUENTLY AMENDED BY DOCUMENT NUMBER 19890081; TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN SAID PARCEL (EXCEPTING FROM SAID PARCEL ALL THE PROPERTY AND SPACE COMPRISING ALL OF THE UNITSTHEREOF AND DEFINED AND SET FORTH IN SAID SUR.

OUT COUNTY CLOTHER OFFICE DECLARATION AS AMENDED AND SAID SURVEY), ALL IN COOK COUNTY, ILLINOIS.

PARCEL ID #12-04-204-053-1004