UNOFFICIAL COPY Doc# 1627004026 Fee \$40.00 RHSP Fee:\$9.00RPRF Fee \$1.00 Karen A. Yarbrough **UCC FINANCING STATEMENT** Cook County Recorder of Deeds **FOLLOW INSTRUCTIONS** Date: 09/26/2016 10:46 AM Pg: 1 of 2 A. NAME & PHONE OF CONTACT AT FILER (optional) Michelle Kras for Michael Pawiak B. E-MAIL CONTACT AT FILER (optional) mkras@oxford-bank.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) Oxford Bank & Trust P.O. Box 129 Addison, IL 60101 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor's mee (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 D name will not fit in line 1b, leave all of item 1 blunk, wheck here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME East-West Properties, LLC ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME 1b. INDIVIDUAL'S SURNAME COUNTRY POSTAL CODE 1c. MAILING ADDRESS USA IL 60462 Orland Park 8603 W. 142nd Street 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full car ie, 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 SUFFIX FIRST PERSO, IAI NAME ADDITIONAL NAME(S)/INITIAL(S) 26. INDIVIDUAL'S SURNAME STATE POSTAL CODE COUNTRY 2c. MAILING ADDRESS CITY 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Farty name (3a or 3b) 3a. ORGANIZATION'S NAME Oxford Bank & Trust AUDITIONAL NAME(S)/INITIAL(S) SUFFIX OR FIRST PERSONAL NAME 36 INDIVIDUAL'S SURNAME STATE PO: TAL CODE COUNTRY 3c. MAILING ADDRESS CITY 50523 USA 1L Oak Brook 1111 W. 22nd Street, Suite 800 4. COLLATERAL: This financing statement covers the following collateral: All inventory, equipment, accounts (including but not limited to all health-care-insurance receivables), chattel paper, is suments (including but not limited to all promissory notes), letter-of-credit rights, letters of credit, documents, deposit accounts, investment property, money, other rights to payment and performance, and general intangibles (including but not limited to all software and all payment intangibles); all fixtures; all attachments, accessions, accessories, fittings, increases, tools, parts, repairs, supplies, and commingled goods relating to the foregoing property, and all additions, replacements of and substitutions for all or any part of the foregoing property; all insurance refunds relating to the foregoing property; all good will relating to the foregoing property; all records and data and embedded software relating to the foregoing property, and all equipment, inventory and software to utilize, create, maintain and process any such records and data on electronic media; and all supporting obligations relating to the foregoing property; all whether now existing or hereafter arising, whether now owned or hereafter acquired or whether now or hereafter subject to any rights in the foregoing property; and all products and proceeds (including but not limited to all insurance payments) of or relating to the foregoing property.

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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	6b. Check only if applicable and check only one box: 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: #8354022-3 (MAP)	
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UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS	l				
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement, because Individual Debtor name did not fit, check here	if line 1b was left blank				
9a. ORGANIZATION'S NAME]			
East-West Properties, LLC					
OR 9b. INDIVIDUAL'S SURNAME					
FIRST PERSONAL NAME					
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE S	PACE IS F	OR FILING OFFICE	USE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only cie additional Debtor name of do not omit, modify, or abbreviate any part of the Debtor name) and enter the in		line 1b or 2b of the Fir	nancing Stater	nent (Form UCC1) (use	exact, full name;
10a. ORGANIZATION'S NAME					
OR 10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME	94				
INDIVIOUAL'S ADDITIONAL NAME(S)/INITIAL(S)	C				SUFFIX
10c. MAILING ADDRESS	CITY		STATE PO	STAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME QI ASSIGN	IOR SECURED PAPTY	S NAME: Provide on	ly <u>one</u> name (11a or 11b)	
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL	NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	4	STATE POS	STAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		<u> </u>	2		<u> </u>
				in Co	
13. X This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATE				
15. Name and address of a RECORD OWNER of real estate described in item 16	covers timber to be a 16. Description of real estate		tracted collate	eral X is filed as a	fixture filing
(if Debtor does not have a record interest):	PARCEL 1: LOTS OF LOT 29 IN B NORTHWEST 1/1 TOWNSHIP 39	5 25, 26, 27 AN LOCK 3 IN H ^I 4 OF THE NO	OBART'S PRTHWE	S SUBDIVISIO ST 1/4 OF SE	N OF THE
	PRINCIPAL MER	IDIAN, IN COC			
	16.15.104.02	4.000			
	16.15.104.02 16.15.104.02 16.15.104.02	5.0000			
17. MISCELLANEOUS:	10.10 104.05	1000			