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1635717854

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KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 12/22/2016 02:34 PM PG: 1 OF 3

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141	
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 22019 - LIBERTYVILLE	
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	56455230 ILIL FIXTURE
File with: Cook, IL	

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 TOLLWAY CENTRE PARTNERS LLC						
OR	1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 1210 W. Northwest Highway			CITY Palatine	STATE IL	POSTAL CODE 60067	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		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 Libertyville Bank and Trust Company						
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 1200 S. Milwaukee Ave.			CITY Libertyville	STATE IL	POSTAL CODE 60048	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:
See Attached Exhibit "A"

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/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

56455230

Marquardt/880071157

Handwritten notes and signatures on the right side of the page, including the word "yes" written multiple times.

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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

TOLLWAY CENTRE PARTNERS LLC

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

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

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):

16. Description of real estate:

Parcel ID:

07-06-201-012-0000, 07-06-201-013-0000,
07-06-102-018-0000, 07-06-102-019-0000

See Attached Exhibit "A"

17. MISCELLANEOUS: 56455230-IL-31 22019 - LIBERTYVILLE BANK AN Libertyville Bank and Trust Company File with: Cook, IL Marquardt/880071157

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WFG National Title Insurance Company
a Williston Financial Group company

EXHIBIT "A" ALTA COMMITMENT

Legal Description

PARCEL 1:

LOT 8 IN BARRINGTON SQUARE INDUSTRIAL CENTER UNIT NO. 1, BEING A SUBDIVISION OF PARTS OF FRACTIONAL SECTION 6, TOWNSHIP 41 NORTH, RANGE 10 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL 2:

LOTS 1 & 2 IN MOSER'S RESUBDIVISION, BEING A RESUBDIVISION OF LOT 2 AND THAT PART OF LOT 3, LYING SOUTH OF A LINE DRAWN AT RIGHT ANGLES, THROUGH A POINT ON THE EAST LINE OF SAID LOT 3, 274.00 FEET SOUTH OF THE NORTHEAST CORNER OF SAID LOT 3, ALL IN THE RESUBDIVISION OF PART OF LOT 12, AND ALL OF LOT 13 IN BARRINGTON SQUARE INDUSTRIAL CENTER UNIT NO. ONE, AND ALL OF LOT 14 IN BARRINGTON SQUARE INDUSTRIAL CENTER UNIT NO. TWO, BOTH BEING A SUBDIVISIONS OF PART OF FRACTIONAL SECTION 6, TOWNSHIP 41 NORTH, RANGE 10 EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED JANUARY 24, 1977 AS DOCUMENT 23797957, IN COOK COUNTY, ILLINOIS.

PARCEL 3:

EASEMENT FOR BENEFIT OF A PORTION OF PARCEL 2 FOR INGRESS AND EGRESS AS CREATED BY GRANT OF EASEMENT RECORDED AS DOCUMENT 23195220.

THE FOLLOWING IS FOR INFORMATIONAL PURPOSES ONLY:

PARCEL 1:

ADDRESS: 2400 HASSELL RD., HOFFMAN ESTATES, IL 60169
PINS: 07-06-201-012-0000 & 07-06-201-013-0000

PARCEL 2:

ADDRESS: 2200 STONINGTON AVE., HOFFMAN ESTATES, IL 60169
PINS: 07-06-102-018-0000 & 07-06-102-019-0000