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HCC	FINA	NCING	STAT	EMENT

FOLLOW INSTRUCTIONS	
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-8	58-5294
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	" "
1256 70840 Urban Partnership Bank 7936 S. Cottage Grove Avenue Chicago, Illinois 60619 Attn: Post Closing-Operations Center	Filed In: Illinois (Cook)
1. DEBTOR'S NAME: Provide only the archor name (1a or 1b) name will not fit in line 1b, leave all of the 1 olonk, check here to a ORGANIZATION'S NAME FC Realty 1.20 Series	and provide the Individual Deb

1701857072	
loc# 1701857072 Fee \$42.00	

: Doc

RHSP FEE:\$9.00 RPRF FEE: \$1.00

KAREN A.YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 01/18/2017 11:24 AM PG: 1 OF 3

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. E	DEBTOR'S NAME: Provide only <u>rife we</u> btor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of tem 1 plank, check here and provide	ll name; do not omit, modify, or abbrev e the Individual Debtor information in it	riate any part of the Debtor em 10 of the Financing St	's name); if any part of the li atement Addendum (Form U	ndividual Debtor'ș CC1Ad)
	1a. ORGANIZATION'S NAME FC Realty I CC Series Stewart				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
1c.	MAILING ADDRESS 1266 N. Wood Street, Unit 1	Chicago	STATE IL	60622	USA
	DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use example) name will not fit in line 2b, leave all of item 2 blank, check here and provide	" ame; do not omit, modify, or abbreve the hidvidual Debtor information in it	riate any part of the Debto tem 10 of the Financing St	's name); if any part of the li atement Addendum (Form U	ndividual Debtor's CC1Ad)
	2a, ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PER 301 AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3, 5	SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC	URED PARTY): Provide only one Se	urec Party name (3a or 3	0)	
	за. ORGANIZATION'S NAME Urban Partnership Bank		~/o		
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	INAL NAME(S)/INITIAL(S)	SUFFIX
3c.	MAILING ADDRESS 7936 S. Cottage Grove Avenue	сіту Chicago	S) A) E	POSTAL CODE 67619	COUNTRY
A	COLLATERAL: This financing statement covers the following collateral: All assets whether now owned or hereafter acquire chattel paper, contracts, documents, equipment, fix				

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	yer Bailee/Bailor Licensee/Licensor

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

8. OPTIONAL FILER REFERENCE DATA:

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UCC FINANCING STATEMENT ADDENDUM

OLLOWINSTRUCTIONS				
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State because Individual Debtor name did not fit, check here	atement; if line 1b was left blank			
9a. ORGANIZATION'S NAME				
FC Realty LLC Series Stewart				
TO Realty ELO deries diewart				
R				
9b. INDIVIDUAL'S SURNAME				;
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INIT.AL/S)	SUFFIX			
			E IS FOR FILING OFFICE	
 DEBTOR'S NAME: Provide (10a or 10³), on y one additional Debte do not omit, modify, or abbreviate any part of the Zebtor's name) and e 		1b or 2b of the Financin	g Statement (Form UCC1) (v	se exact, full name
10a. ORGANIZATION'S NAME			· .	·
	•			
10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				·
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	- 0,			SUFFIX
INDIVIDUAL S ADDITIONAL MARKETONIN TIAL(S)	4			
0c. MAILING ADDRESS	CITY	STAT	E POSTAL CODE	COUNTRY
	O DETAILS			
ADDITIONAL SECURED PARTY'S NAME or A ADDITION'S NAME	ASSIGNOR SECURED PARTY'S N	IAME: Provide only one	name (11a or 11b)	:
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDI	TIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	STAT	E POSTAL CODE	COUNTRY
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):				
2. ADDITIONAL STAGE FOR TEM 4 (GOILLICIA).				
	1		(),	
			Office	
			10-	
			C O	
This FINANCING STATEMENT is to be filed (for record) (or record REAL ESTATE RECORDS (if applicable)	ded) in the 14. This FINANCING STATEMEN		7 - 7 - 7	- C
5, Name and address of a RECORD OWNER of real estate described in it	Covers timber to be cut	covers as-extracti	ed collateral V is thed as	a fixture filing
(if Debtor does not have a record interest):	See Exhibit A attache	ed hereto	•	
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1701857072 Page: 3 of 3

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LOT 1 IN WILLIAM D. ROWLEY'S RESUBDIVISION OF THE EAST 158 FEET OF THE SOUTH 270 FEET OF THE SOUTH 1/2 OF BLOCK 11 IN LINDEN GROVE, A SUBDIVISION OF THE WEST 35 ACRES OF THE NORTH 70 ACRES AND THE SOUTH 90 ACRES OF THE NORTHWEST 1/4 OF SECTION 21, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERICALI, IN COOK COUNTY, ILLINOIS.

Property address: 6534 South Stewart Avenue, Chicago. IL 60621 County Clark's Office

300 pg

Tax Number: 20-21-122-013