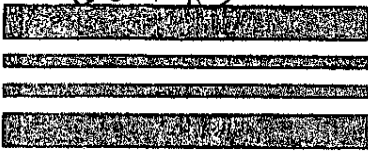


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1701834047

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS

Doc# 1701834047 Fee \$40.00

A. NAME & PHONE OF CONTACT AT FILER (optional) Old Republic National Title Insurance 866-969-5010
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) LaRocca Hornik Rosen Greenberg & Blaha Att: Jonathan L. Hornik, Esq. 83 South Street Suite 302 Freehold, NJ 07728

RHSP FEE:\$9.00 RPRF FEE: \$1.00
KAREN A. YARBROUGH
COOK COUNTY RECORDER OF DEEDS
DATE: 01/18/2017 10:48 AM PG: 1 OF 2

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 GRAND DELUXE APARTMENTS, LLC
OR
1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
1c. MAILING ADDRESS 1323 S. Komensky Chicago IL 60623 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 RCN CAPITAL FUNDING, LLC
OR
3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
3c. MAILING ADDRESS 75 Gerber Road East South Windsor CT 06074 USA

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

See attached Schedule A and Exhibit A for collateral description

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): [] Lessor/Lessor [] Consignee/Consignor [] Seller/Buyer [] Bailee/Bailor [] Licensee/Licenser
8. OPTIONAL FILER REFERENCE DATA:

UNOFFICIAL COPY

LEGAL DESCRIPTION

LOT 133 IN F.S. TYRELLS SUBDIVISION OF BLOCK 20 IN WEST CHICAGO LAND COMPANY'S SUBDIVISION OF SECTION 10, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Address commonly known as:

4319 W. Maypole
Chicago, IL 60624

PIN#: 16-10-413-004-0000

COOK COUNTY
RECORDER OF DEEDS

Property of Cook County Clerk's Office