NOFFICIAL COPY

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@wolte	erskluwer.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	506503 - SIERRA VIEW
CT Lien Solutions	58028184
P.O. Box 29071 Glendale, CA 91209-9071	ILIL
	FIXTURE
File with: Cook, IL	

1707418140	

Doc# 1707418140 Fee \$40.00

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

CAREN A. YARBROUGH

DOOK COUNTY RECORDER OF DEEDS

DATE: 03/15/2017 03:24 PM PG: 1 OF 2

٠ ا	File with: Cook, IL	THE A	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
	DEBTOR'S NAME: Provide only <u>file 1</u> ebtor name (1a or 1b) ame will not fit in line 1b, leave all of item finlank, check here						
ĺ	1a ORGANIZATION'S NAME	and the state of t					
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
	PETROCELLI	NICK	A.				
1c. i	MAILING ADDRESS	СІТУ	STATE POSTAL CODE	COUNTRY			
42	24 ALDEN LANE	SCHAUMBURG	IL 60194	USA			
2. D	DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use excet, in the ame, do not omit, modify, or abbreviate	e any part of the Debtor's name); if any part of the li	ndividuat Debtor's			
na	ame will not fit in line 2b, leave all of item 2 blank, check here	and provide *'.e 'dividual Debtor information in item	10 of the Financing Statement Addendum (Form U	CC1Ad)			
- 1	2a. ORGANIZATION'S NAME		· · · · · · · · · · · · · · · · · · ·				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERFON, L NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
	PETROCELLI	CAROLINA	T.				
2c.	MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY			
42	24 ALDEN LANE	SCHAUMBURG	IL 60194	USA			
3. Ş	SECURED PARTY'S NAME (or NAME of ASSIGNEE of AS	SSIGNOR SECURED PARTY): Provide only one Section	∪ Party name (3a or 3b)				
	3a. ORGANIZATION'S NAME						
	INTERLOCK INDUSTRIES (MIDWEST) IN	C.					
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
			1				
3c.	MAILING ADDRESS	СПҮ	ST (1) POSTAL CODE	COUNTRY			
10	04 - 2355 Fairview Avenue	Roseville	MN 55113	USA			
4. C	COLLATERAL: This financing statement covers the following or	ollateral:	Or.				
ΤH	IIS FIXTURE FILING COVERS A ROOFING SYST	EM & IS TO BE RECORDED IN THE REAL	ESTATE RECORDS OF COOK COUNT	ΓY IL			

COUNTY/RECORDING DISTRICT: COOK

SITUS/ADDRESS: 424 ALDEN LANE, SCHAUMBURG, IL 60194

PARCEL #: 07-16-315-009-0000 CONVEYS: TRUSTEE'S DEED **DOCUMENT NO: 90297929** DATE RECORDED: 6-22-1990

LEGAL: THE FOLLOWING DESCRIBED REAL ESTATE, SITUATED IN COOK COUNTY, ILLINOIS, TO-WIT:
LOT 1171 IN STRATHMORE, SCHAUMBURG, UNIT 13, BEING A SUBDIVISION OF PART OF THE SOUTH HALF OF THE SOUTHWEST QUARTER OF SECTION 16, TOWNSHIP 41 NORTH, RANGE 10, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED SEPTEMBER 12, 1972, AS DOCUMENT NO. 22047860, IN COOK COUNTY, ILLINOIS.

5. Check only if applicable and chec	k only one box: Collateral is held in a	Trust (see UCC1Ad, item 17 ar	d Instructions)	being administered by a De	cedent's Personal Representative
6a. Check only if applicable and che	ck <u>only</u> one box:			6b. Check only if applicabl	e and check only one box:
Public-Finance Transaction	Manufactured-Home Transaction	on A Debtor is a Trans	mitting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATIVE DESIGNATION (f applicable): Lessee/Lessor	Consignee/Consignor	Seller/Buye	er Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE 58028184	DATA: LOAN NUMBER: ILIL16033-	-RC		LOAN AMO	DUNT: \$20,060.00

1707418140 Page: 2 of 2

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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	th was left blank]			
because Individual Debtor name did not fit, check here		4			
9a. ORGANIZATION'S NAME					
		-			
OR 95 INDIVIDUAL'S SURNAME		1			
PETROCELLI					
FIRST PERSONAL NAM		1			
NICK					
ADDITIONAL NAME(S)/INITIAL S)	SUFFIX	1			
A.		THE ABOVE	SDACE	IS FOR FILING OFFI	ICE USE ONLY
DEPTORIO NAME De la 100 et a 1	Sabtar name that did not fit in	<u> </u>		·	
10. DEBTOR'S NAME: Provide (10a or 1 b) only one additional Debtor name or D do not omit, modify, or abbreviate any part of the Deficor's name) and enter the mail		Time 15 of 25 of the Fit	iancing o	ratement (Form OCC 1) (us	e exact, full flattle,
10a, ORGANIZATION'S NAME		····			
OR 10b. INDIVIDUAL'S SURNAME	<u></u>				
INDIVIDUAL'S FIRST PERSONAL NAME		· · · · · · · · · · · · · · · · · · ·			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
	T_{\frown}				
10c, MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
1					
11. ☐ ADDITIONAL SECURED PARTY'S NAME ☐ ASSIGNO	R SECURED PARTY'S	NAME: Provide only	one nam	e (11a or 11b)	
11a. ORGANIZATION'S NAME	7).	·		<u> </u>	
OR 11b. (NDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
	<u>.</u>	<u> </u>			
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		1			
		1	S		
			1		
;					
				(C)	
				()	
		CONTRACTOR OF		·	
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	_			 	
	covers timber to be		extracted	collateral X 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 estal Parcel ID:	ne:			
· ·	07-16-315-009	0.000			
	07-10-313-00	9-0000			
				NOT COST	
	COUNTY/REC		-		
	SITUS/ADDRI	ESS: 424 Al	LDE1	I LANE,	
	SCHAUMBUF	RG, IL 60194	1		
	CONVEYS: T)	
	DOC#: 90297				
!	500m. 00201				
17 MISCELLANEOUS SRO28184-IL-31 506503 - SIERRA VIEW HOLDINGS INTER	LOCK INDUSTRIES (MIDWEST)	Cr. Sc. Coal. II	LOANIN	JMBER: ILIL16033-RC LOAF	AMOUNT, \$20,000 O