**MNOFFICIAL COPY** 

×1722615140×

#### **UCC FINANCING STATEMENT**

**FOLLOW INSTRUCTIONS** 

A. NAME & PHONE OF CONTACT AT FILER (optional)  Jonathan M. Boulahanis - Gordon & Rees, LLI	<b>&gt;</b>
B. E-MAIL CONTACT AT FILER (optional)	
jboulahanis@gordonrees.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Jonathan M. Boulahanis, Esq.	$\neg$
One North Franklin Street, Suite 800	ı
Chicago, IL 60606	
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HSP FEE:\$9.00 RPRF FEE: \$1.00

(AREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

)ATE: 08/14/2017 03:05 PM PG: 1 OF 4

	THE ABO	OVE SPACE IS FO	R FILING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide only an Debtor name (1a or 1b) (us name will not fit in line 1b, leave all of tem I blank, check here	e exact, full name; do not omit, modify, or abbreviate a and provide the Individual Debtor information in item 1			
1a. ORGANIZATION'S NAME 2944 ALBANY LLC				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3215 W. FULLERTON AVE.	CHICAGO	STATE	60647	COUNTRY
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use name will not fit in line 2b, leave all of item 2 blank, check here     2a. ORGANIZATION'S NAME	e exict, ill name; do not omit, modify, or abbreviate a and provide the Individual Debtor information in item 1			
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADĐITiO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
B. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIG	NOR SECURED PARTY): Provide only give Secured	Party name (3a or 3b	<b>)</b>	
3a. ORGANIZATION'S NAME WINTRUST BANK				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 231 S. LASALLE ST., 2ND FLOOR	CHICAGO	STATE	POSTAL CODE 60604	COUNTRY
4. COLLATERAL: This financing statement covers the following collate ALL COLLATERAL OF DEBTOR LISTED (	eral: ON EXHIIBIT A, ATTACHED AN	D INCORPO	RAZED HERETO	<del>.</del> ).

Attorneys' Title Guaranty Fund, Inc. 1 S. Wacker Dr., Ste. 2400 Chicago, IL 60606-4650

Attn: Search Department

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 Ballee/Ballor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	
	<u> </u>

CCRD REVIEW

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### **UCC FINANCING STATEMENT ADDENDUM**

	it if line 1h was left blank	Ì			
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statemen because Individual Debtor name did not fit, check here	ic, it mile to vias lot blank				
9a. ORGANIZATION'S NAME					
2944 ALBANY LLC					
9b. INDIVIDUAL'S SURNAME					
FIRST PERSONAL NAME					
ADDITIONAL NAME(S)/INT./.L(S)	SUFFIX				
0.		THE AROVE	SPACE	S FOR FILING OFFICE	ISE ON! Y
. DEBTOR'S NAME: Provide (1'a or 3h) only one additional Debtor name	e or Debtor name that did not fit in				
do not omit, modify, or abbreviate any par of the Debtor's name) and enter the					
10a. ORGANIZATION'S NAME					
10b. INDIVIDUAL'S SURNAME					<u> </u>
FUO. INDIVIDUALS SURVAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	0/		***	·	SUFFIX
	4		T	1	
MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
ADDITIONAL OF CUDED DARTY! NAME ACCIO	NOR SECURED PARTY	C MANEL 6 14		/44: 44! \$	
. ADDITIONAL SECURED PARTY'S NAME or ASSIG	SNOR SECURED PARTY	S NAME: Provide o	only <u>one</u> n	me (11a or 11b)	
	<sup>3</sup> /2 <sub>2</sub>				
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
	-		07475	POSTAL CODE	COUNTROL
. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
ADDITIONAL SPACE FOR ITEM 4 (Collateral):			<u> </u>	l	
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This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	ne 14. This Financing State	MENT:	0,	O <sub>FF</sub>	
REAL ESTATE RECORDS (if applicable)	covers timber to be	cut Covers as-	extracted	<u></u>	fixture filing
REAL ESTATE RECORDS (if applicable)	Covers timber to be	cut covers as-		collateral  is filed as a	fixture filing
REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate described in Item 16	covers timber to be 16. Description of real estate SEE ATTACHED	cut covers as-	CONT	collateral  is filed as a	fixture filing
REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate described in Item 16	Covers timber to be	cut covers as-	CONT	collateral  is filed as a	fixture filing
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#### **EXHIBIT A**

Any part of the commercial real property and improvements commonly known 2944-48 North Albany Avenue, Chicago, Illinois 60618 (the "Premises") which may or might now or hereafter be or be deemed to be personal property, fixtures or property other than real estate and personal property owned by lessees of the Premises (all hereinafter referred to as "Collateral").

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### EXHIBIT B LEGAL DESCRIPTION

LOT 22 IN HAMMOND'S SUBDIVISION OF THE NORTH ½ OF THE EAST ½ OF THE WEST ½ OF THE SOUTHWEST ¼ OF THE NORTHWEST ¼ OF SECTION 25, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office