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Doc# 1732515143 Fee \$42.00

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

KAREN A.YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 11/21/2017 03:46 PM PG: 1 OF 3

UCC FINANCING	STATEMENT
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KITCHEN REMODEL

FOLLOWINSTRUCTIONS	
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-	5294
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
1390 42350	
Corporation Service Company 801 Adlai Stevenson Drive	·
Springfield, IL 62703	Filed In: Illinois
	(Cook)
1. DEBTOR'S NAME: Provide only c to Debtor name (1a or 1b) (use	

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I DE ADUVE	SPACE IS	FUR FILING	OFFICE USE	UNL

	DEBTOR'S NAME: Provide only one Liebtor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of item 1 out nk, check here and provide	name; do not omit, modify, or abbreviate any part the Individual Debtor information in item 10 of the				
OR	1a, ORGANIZATION'S NAME			•		
OR	1b. INDIVIDUAL'S SURNAME HATTER	FIRST PERSONAL NAME TENESHA	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
1c.	MAILING ADDRESS 1030 GREENWOOD	MAYWOOD	STATE	POSTAL CODE 60153	COUNTRY	
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exertival pame; 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)						
ΩB	2a. ORGANIZATION'S NAME					
ŲΚ	2b. INDIVIDUAL'S SURNAME	FIRST PERSUNAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	
2c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
3. 8	SECURED PARTY'S NAME (or NAME of ASSIGNEE OF ASSIGNOR SECL	IRED PARTY): Provide only une Securit Party n	ame (3a or 3t	o)		
	3a. ORGANIZATION'S NAME Aqua Finance, Inc.					
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
3c.	MAILING ADDRESS One Corporate Drive Suite 300	ατγ Wausau	STATE	POSTAL CODE 54401	COUNTRY	
4. C	OLATERAL: This financing statement covers the following collateral:		•	O _X		

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 <u>only</u> if applicable and check <u>only</u> one box;	6b. Check <u>only</u> if applicable and check <u>only</u> 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	er Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: ;AFIS001651555	1390 42350

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UCC FINANCING STATEMENT ADDENDUM

FOLLOWINSTRUCTIONS				
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement, it because Individual Debtor name did not fit, check here	f line 1b was left blank]		
9a, ORGANIZATION'S NAME		1		
]		
OR 9b. INDIVIDUAL'S SURNAME				
HATTER				
FIRST PERSONAL NAV.C.		1		
TENESHA				
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
AS DEPTORIGUES		*	IS FOR FILING OFFICE	
10. DEBTOR'S NAME: Provide (10a or 1 L) only one additional Debtor name of do not omit, modify, or abbreviate any part of the patter's name) and enter the n		n line 1b or 2b of the Financing	Statement (Form UCC1) (use	exact, full name;
10a. ORGANIZATION'S NAME				
OR				
10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
0				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
	τ_{\sim}			
10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME of ASSIGN	IOD SECURE, DARTY	'S NAME: Provide only one r	/44= a. 44b)	
11a. ORGANIZATION'S NAME	OK SECOKE FEATURE	3 NAME: Floride Only offer	iame (Tra or TTb)	
OR				
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITI	ONAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
		'Q',		
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		7	· · · · · · · · · · · · · · · · · · ·	
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	1			
 This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 	14. This FINANCING STATE covers timber to be		collateral is filed as a	fixture filing
15. Name and address of a RECORD OWNER of real estate described in item 15	16. Description of real estate	e:	CONSTRUCT IS MICH AS A	TIATURE HINING
(if Debtor does not have a record interest): TENESHA HATTER	County COOK CO			
1030 GREENWOOD	l .	ber 15-14-201-020 ct 170318175.001021		
MAYWOOD IL 60153	Lot 11,10	310173.001021		
		on LOT:11,10 DIST:	31 CITY:PROVISO)
		MER:SEC 14 TWN 3	39N RNG 12E MAI)
	REF:15-14-NE (A	&B)		
47 MICCELLANGOUG.				
17. MISCELLANEOUS:				

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LEGAL DESCRIPTION

THE SOUTH 9.45 FEET OF LOT 10 AND LOT 11 IN BLOCK REAL ESTATE IMPROVEMENT COMPANY'S SUBDIVISION OF LOTS 16 AND 32 BOTH INCLUSIVE IN GREENE'S SUBDIVISION OF THE WEST 677 FEET OF THE NORTH 504.9 FEET IN THE NORTHEAST ¼ OF SECTION 14, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

COMMONLY KNOWN AS: 1030 S. GREENWOOD, MAYWOOD, ILLINOIS, 60153 TODERTY OF COOK COUNTY CLERK'S OFFICE

P.I.N.: 15-14-201-020-000