

40031828 R127
(2/3)



1734057034

Doc# 1734057034 Fee \$44.00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
Tina McAninch (515) 248-8388

B. E-MAIL CONTACT AT FILER (optional)
mcaninch.tina@principal.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Employers Reassurance Corporation
801 Grand Avenue
Des Moines, Iowa 50392-1450
ATTN: Kristen Fahey

RHSP FEE: \$9.00 RPRF FEE: \$1.00
KAREN A. YARBROUGH
COOK COUNTY RECORDER OF DEEDS
DATE: 12/06/2017 12:55 PM PG: 1 OF 4

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
918-924 Belmont, LLC

OR

1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
1405 W. Diversey Parkway Chicago IL 60614 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
Employers Reassurance Corporation

OR

3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
801 Grand Avenue Des Moines IA 50392-1450 USA

4. COLLATERAL: This financing statement covers the following collateral:
See Exhibits A & B attached

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): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensors

8. OPTIONAL FILER REFERENCE DATA:
Loan 758101 to be filed with Cook County, Illinois

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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 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME

918-924 Belmont, LLC

OR 9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR 10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

Employers Reassurance Corporation

OR 11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

 covers timber to be cut covers as-extracted collateral 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 estate:

See Exhibits A & B attached
Secured Party Address: 801 Grand Avenue
Des Moines, Iowa 50392-1450

Debtor's Address: 1405 W. Diversey Parkway
Chicago, Illinois 60614

PIN #'s

14-20-426-016-0000 & 14-20-426-017-0000

17. MISCELLANEOUS:

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EXHIBIT A

LEGAL DESCRIPTION

Loan No. 758101

Parcel 1:

Lots 19 and 20 in the Subdivision of Lot 1 in the Resubdivision of Block 2 in Hambleton, Weston and Davis Subdivision of the South 1/2 of the Southeast 1/4 of the Southeast 1/4 of Section 20, Township 40 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

Parcel 2:

Lots 21 and 22 in M. L. Schudders Jr Subdivision of Lot 1 in Resubdivision of Block 2 in Hambleton, Weston and Davis Subdivision of the South 1/2 of the Southeast 1/4 of the Southeast 1/4 of Section 20, Township 40 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

FOR INFORMATION ONLY:

PIN numbers:

14-20-426-016-0000

14-20-426-017-0000

Common Address:

918-924 West Belmont Avenue, Chicago, Illinois 60657

Property of Cook County Clerk's Office

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UCC EXHIBIT B
Loan No. 758101

**ALL ASSETS OF THE DEBTOR, WHETHER NOW OWNED OR EXISTING OR
HEREAFTER ACQUIRED OR ARISING AND ALL PROCEEDS AND PRODUCTS
THEREOF, INCLUDING, WITHOUT LIMITATION, ALL FIXTURES ON THE REAL
PROPERTY DESCRIBED ON EXHIBIT A ATTACHED HERETO AND
INCORPORATED HEREIN BY REFERENCE.**

Property of Cook County Clerk's Office