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**FOLLOW INSTRUCTIONS** 

	- 10-00
A. NAME &	PHONE OF CONTACT AT FILER (optional)
CSC	1-800-858-5294

B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)

1435 95107 csc 801 Adlai Stevenson Drive



Doc# 1806844071 Fee \$40.00

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

KAREN A.YARBROUGH

COOK COUNTY RECORDER OF DEEDS

l	Springfield, IL 62702 Fil	ed In: Illinois (Cook)	~	03/09/	2018 03:46 PM PG:	1 0F 2
			THE ABOV			
1	1a. ORGANIZATION'S NAME		modify, or abbreviate any part of or information in item 10 of the Fi			
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	O'Hara	Michael				
1c.	MAILING ADDRESS 406 Hillside Dr.	Streamwoo	od	STATE	POSTAL CODE 60107	COUNTRY
	DEBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) (use exact, far name will not fit in line 2b, leave all of item 2 blank, check here and provided and pro		modify, or abbreviate any part of or information in item 10 of the Fi			
OR	2b. INDIVIDUAL'S SURNAME	FIRST PEF SON	LNAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c.	MAILING ADDRESS	CITY	74	STATE	POSTAL CODE	COUNTRY
	SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC 3a. ORGANIZATION'S NAME MICROF	CURED PARTY): Pro	vide only <u>one</u> Sec ared a arty name	ie (3a or 3t	)	
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	//DOITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c.	MAILING ADDRESS P.O. Box 70085	CITY Albany		STATE GA	POSTAL CODE 31707	COUNTRY

4. COLLATERAL: This financing statement covers the following collateral:
All of the Debtor's right, title and interest, now existing and hereafter arising, in and to all of the Coupment subject to that certain Lease No. 64533 between Debtor as Lessee and Microf, LLC as Lessor, (ii) all insurance, warranty, rental and other claims and rights to payment and chattel paper arising out of such Equipment, (iii) all books, records and proceeds relating to the foregoing, and (iv) any other property or rights to which the Lessee may be or become entitled by reason of Lessee's interest in the Equipment. For the purposes of this financing statement, "Equipment" shall be further described in item 12 of the UCC1Ad attached hereto, and includes all substitutions, replacements, upgrades, repairs, parts and attachments, improvements and accessions thereto. THIS FILING IS FOR PRECAUTIONARY AND INFORMATIONAL PURPOSES ONLY. THE PARTIES CONSIDER THIS TRANSACTION TO BE A TRUE LEASE. LESSEE HAS NO RIGHT TO SELL OR PLEDGE THE EQUIPMENT, IT IS OWNED BY LESSOR AND LEASED TO LESSEE.

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	rer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	1425 05103

1435 95107



1806844071 Page: 2 of 2

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## UCC FINANCING STATEMENT ADDENDUM

. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing	g Statement; if line 1b was left blank				
because Individual Debtor name did not fit, check here	•				
9a. ORGANIZATION'S NAME					
		ŀ			
R					
96. INDIVIDUAL'S SURNAME					
O'Hara					
FIRST PERSONAL N ME					
Michael					
ADDITIONAL NAME(\$)/INIT.AL(; ))	SUFFIX				
10				IS FOR FILING OF	
D. DEBTOR'S NAME: Provide (10a or 0b, Jnh) one additional D		fit in line 1b or 2b of the E	inancing S	Statement (Form UCC	1) (use exact, full nan
do not omit, modify, or abbreviate any part of the Dilotor's name) at	nd enter the mailing address in line 10c				
10a. ORGANIZATION'S NAME	•				
R 10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
		•			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	7				SUFFIX
c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
	<b>O</b> ,				
. ADDITIONAL SECURED PARTY'S NAME or	ASSIGNOR SECURE ) FAR	TY'S NAME: Provide	only one na	me (11a or 11b)	<b>'</b>
11a. ORGANIZATION'S NAME		×	,		
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM		ADDITIO	NAL NAME(S)/INITIA	L(S) SUFFIX
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	C	ADDITIO	NAL NAME(S)/INITIA	L(S) SUFFIX
TID. INDIVIDUALS SUKNAME	FIRST PERSONAL NAM	C	ADDITIO	NAL NAME(S)/INITIA	L(S) SUFFIX
11b. INDIVIDUAL'S SURNAME  c. MAILING ADDRESS		C			
c. MAILING ADDRESS	СІТУ	C			
c. MAILING ADDRESS	СІТУ	C			
c. MAILING ADDRESS	СІТУ	C			
11D. INDIVIDUAL S SOKNAME	СІТУ	C			
c. MAILING ADDRESS	СІТУ				
C. MAILING ADDRESS	СІТУ	C			
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C. MAILING ADDRESS	СІТУ	C			
: MAILING ADDRESS  ADDITIONAL SPACE FOR ITEM 4 (Collateral): DUCANE Furnace M# 80G2UH070AV12 S#	сітч ‡ 1717K37419	<u>C</u>			
: MAILING ADDRESS  ADDITIONAL SPACE FOR ITEM 4 (Collateral): OUCANE Furnace M# 80G2UH070AV12 S#	сітч ‡ 1717K37419	ATEMENT:	STATE	POSTAL CODE	COUNTRY
c. MAILING ADDRESS  ADDITIONAL SPACE FOR ITEM 4 (Collateral):  DUCANE Furnace M# 80G2UH070AV12 S#  This FINANCING STATEMENT is to be filed [for record] (or rec REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate described in	CITY  # 1717K37419  corded) in the    14. This FINANCING STA	NTEMENT: be cut	STATE	POSTAL CODE	
c. MAILING ADDRESS  ADDITIONAL SPACE FOR ITEM 4 (Collateral): OUCANE Furnace M# 80G2UH070AV12 S#	CITY  # 1717K37419  corded) in the    14. This FINANCING STA	NTEMENT: be cut  covers astate:	STATE STATE	POSTAL CODE	COUNTRY
c. MAILING ADDRESS  ADDITIONAL SPACE FOR ITEM 4 (Collateral):  OUCANE Furnace M# 80G2UH070AV12 S#  This FINANCING STATEMENT is to be filed [for record] (or recreated accorded to the content of the cont	corded) in the 14. This FINANCING ST/ covers timber to in item 16 16. Description of real es	NTEMENT: be cut covers astate: of the Woodlar	extracted of Height	POSTAL CODE  collateral  is file	COUNTRY
c. MAILING ADDRESS  ADDITIONAL SPACE FOR ITEM 4 (Collateral):  OUCANE Furnace M# 80G2UH070AV12 S#  This FINANCING STATEMENT is to be filed [for record] (or recreated accorded to the content of the cont	corded) in the 14. This FINANCING STATE covers timber to in item 16 16. Description of real es Lot 1086, unit 3	ATEMENT: be cut covers astate: of the Woodlar, county of Coo	extracted of Height	POSTAL CODE  collateral  is file	COUNTRY
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