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JCC FINANCING STATEMENT		*1812329020*				
A. NAME & PHONE OF CONTACT AT FILER (optional)		Doc# 1812329020 Fee \$40.00				
UCC MANAGER (800) 837-9700	RHSP	FEE:S9.00 RPRF FEE: \$:	1.00			
E-MAIL CONTACT AT FILER (optional)		KAREN A. YARBROUGH COOK COUNTY RECORDER OF DEEDS				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
CASTLE CREDIT CO HOLDINGS, LLC		05/03/2018 11:16 AM				
8430 W BRYN MAWR SUITE 750	1					
CHICAGO IL 60631	*		-			
	1					
	THE AB	OVE SPACE IS FOR FILING	OFFICE USE ONLY			
DEBTOR'S NAME: Provide on' one Debtor name (1a or 1b) (use exename will not fit in line 1b, leave all of ner. 1 , lank, check here and p	act, full name; do not omit, modify, or abbreviate provide the Individual Debtor information in item					
1a. ORGANIZATION'S NAME	-					
OR 16. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S	S)/INITIAL(S) SUFFIX			
MENDEZ Ox	CARLOS					
c. MAILING ADDRESS 3800 W 67TH PL	CHICAGO	IL 60629				
. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use the	Lat name; do not omit, modify, or abbreviate	any part of the Debtor's name); if a	ny part of the Individual Debtor's			
	or vidr the Individual Debtor information in item	10 of the Financing Statement Add	endum (Form UCC1Ad)			
2a. ÖRĞANIZATION'S NAME						
2b. INDIVIDUAL'S SURNAME FIRST PE (SC NAL NAME						
2b. INDIVIDUAL'S SURNAME	FIRST PEKSCNAL NAME	ADDITIONAL NAME(S	S)/INITIAL(S) SUFFIX			
R 2b. INDIVIDUAL'S SURNAME	FIRST PF (SC NAL NAME	ADDITIONAL NAME(S	S)/INITIAL(S) SUFFIX			
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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS						
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if because Individual Debtor name did not fit, check here	f line 1b was left blank					
9a. ORGANIZATION'S NAME						
• •						
OR 9b. INDIVIDUAL'S SURNAME MENDEZ						
FIRST PERSONAL JAM'S						
CARLOS						
ADDITIONAL NAME(S)/IN' (A)	SUFFIX					
40 DERTOD'S NAME, Provide Man 20 and an additional Debter some a	- Debter nome that did not fit in			S FOR FILING OFFICE		
10. DEBTOR'S NAME: Provide (10a c '10t) only one additional Debtor name of do not omit, modify, or abbreviate any part of the Tebtor's name) and enter the name.		line to or 20 or the r	Inancing s	tatement (Form OCC I) (use	exact, full name,	
10a. ORGANIZATION'S NAME						
OR 10b. INDIVIDUAL'S SURNAME						
IUD, (INDIVIDUAL S SURIVAIME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					Leuren	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	-				SUFFIX	
10c. MAILING ADDRESS	CIT		STATE	POSTAL CODE	COUNTRY	
	OR SECURED PARTY	S NAME: Provide (only <u>one</u> na	ime (11a or 11b)		
11a. ORGANIZATION'S NAME	1//					
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
				T		
11c. MAILING ADDRESS	CITY	0	STATE	POSTAL CODE	COUNTRY	
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		7	1	<u> </u>	1	
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13. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the	14. This FINANCING STATE	MENT:				
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	covers timber to be o	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					
	PARCEL NUMBE		-036-00	000		
•	LEGAL DESCRIE	'RIPTION: OCK 1 IN HENRY HOGANS MAQRUETTE PARK O CHICAGO, A SUBDIVISION OF THE				
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	CHICAGO, IL 600	629				
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17. MISCELLANEOUS:						