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JCC FINANCING STATEMENT OLLOW INSTRUCTIONS		*1821517106* Doc# 1821517106 Fee \$40.00					
A, NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294		RHSP FEE:S9.00 RPRF FEE: \$1.00 KAREN A.YARBROUGH COOK COUNTY RECORDER OF DEEDS DATE: 08/03/2018 03:12 PM PG: 1 OF 2					
B. E-MAIL CONTACT AT FILER (optional)							
SPRFiling@cscglobal.com SEND ACKNOWLEDGMENT TO: (Name and Address)							
	<u> </u>	2.,	, T. O.	. 03,5018 83:15 PM	PG: 1 0F		
1501 58422 CSC 801 Adlai Stevenson Drive	'	`					
Springfield, IL 62705	Filed In: Illinois						
	(Cook)						
		HE ABOVE SPA	CE IS FO	R FILING OFFICE USE	ONLY		
DEBTOR'S NAME: Provide on', one Debtor name (1a or 1b) (use ex name will not fit in line 1b, leave all cf item. b) ink, check here and and la. ORGANIZATION'S NAME	act, full name; do not omit, modify, or ab provide the Individual Debtor information						
1b. INDIVIDUAL'S SURNAME Murphy	FIRST PERSONAL NAME Meka		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX		
MAILING ADDRESS 831 E. 89th	сіту Chicago		STATE	POSTAL CODE 60619	COUNTRY		
DEBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) (use exa name will not fit in line 2b, leave all of item 2 blank, check here and	act, 'alf r ame; do not omit, modify, or abl						
2a. ORGANIZATION'S NAME	C						
26. INDIVIDUAL'S SURNAME Murphy	FIRST PEF SON AL NAME Earnesting		ADDITIO	SUFFIX			
MAILING ADDRESS 10056 S. Halsted	Chicago		STATE IL	60628	COUNTRY		
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR 3a. ORGANIZATION'S NAME MICROF	R SECURED PARTY): Provide only one	Ser ared Party nam	e (3a or 3b)			
GEL STANDEN OF TANIE VIIICEO							
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		/.DDITIONAL NAME(S)/INITIAL(S)		SUFFIX		
MAILING ADDRESS P.O. Box 70085	CITY Albany		STATE GA	POSTAL CODE C1707	COUNTRY		
COLLATERAL: This financing statement covers the following collateral: If of the Debtor's right, title and interest, now e ertain Lease No. 70671 between Debtor as Le ther claims and rights to payment and chattel pelating to the foregoing, and (iv) any other proper f. Lessee's interest in the Equipment. For the person of the proper state of the	essee and Microf, LLC as paper arising out of such perty or rights to which the purposes of this financing ereto, and includes all su	Lessor, (ii) a Equipment, e Lessee ma statement, ' bstitutions, r	ill insur (iii) all I y be oi 'Equipr eplace : PREC	rance, warranty, rebooks, records and become entitled ment" shall be furt ments, upgrades, CAUTIONARY AN	ental and d proceeds by reason her repairs, D		
escribed in item 12 of the UCC1Ad attached harts and attachments, improvements and accensional PURPOSES ONLY. THE PARSEE HAS NO RIGHT TO SELL OR PLEDG	ARTIES CONSIDER THIS	S TRANSAC					
escribed in item 12 of the UCC1Ad attached hearts and attachments, improvements and accensed and accensed attachments, improvements and accensed attachments, improvements and accensed attachments and accensed attachments. The Province are accents and attachments and accenters and attachments.	ARTIES CONSIDER THISE THE EQUIPMENT, IT	S TRANSAC IS OWNED	BY LE		al Representative		

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UCC FINANCING STATEMENT ADDENDUM

OLLOW INSTRUCTIONS						
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Finan because Individual Debtor name did not fit, check here	ncing Statement; if line 1b was	left blank				
9a. ORGANIZATION'S NAME						
9b. INDIVIDUAL'S SURNAME						
Murphy						
FIRST PERSONAL ME						
Meka		İ				
ADDITIONAL NAME(S)/INI (AL/ 3)		SUFFIX				
10_			THE ABOVE	SPACE	S FOR FILING OFFI	CE USE ONLY
 DEBTOR'S NAME: Provide (10a or 10b) only one additions do not omit, modify, or abbreviate any part of the fichlor's name 			1b or 2b of the F	inancing S	statement (Form UCC1)	(use exact, full name;
10a. ORGANIZATION'S NAME	e) and enter the making addic-	33 () (1) (0)				
10b. INDIVIDUAL'S SURNAME	/					
INDIVIDUAL'S FIRST PERSONAL NAME	0					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
	1					
. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
		<u> </u>				
ADDITIONAL SECURED PARTY'S NAME or	ASSIGNOR SECU	IRED FARTY'S NA	AME: Provide o	nly <u>one</u> na	me (11a or 11b)	
11a. ORGANIZATION'S NAME						
11b. INDIVIDUAL'S SURNAME	FIRST PER	RSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S	S) SUFFIX
MAILING ADDRESS	CITY		<u> </u>	STATE	TPOSTAL CODE	COUNTRY
MAILING AUDRESS	.		CA	SIAIL	FOSTAL CODE	COOMIN
ADDITIONAL SPACE FOR ITEM 4 (Collateral): 018 CARRIER A Coil M# CNPVP3017AL 418E10510	LA S# 2618X58540	1 2018 BRYAN [*]	T A/C Con	deirse	r M# 116BNA0	30000 S#
This FINANCING STATEMENT is to be filed [for record] (or REAL ESTATE RECORDS (if applicable)		NANCING STATEMENT				
Name and address of a RECORD OWNER of real estate describ		vers timber to be cut otion of real estate:	covers as-e	extracted o	collateral 🔽 is filed :	as a fixture filing
Name and address or a RECORD OWNER of real estate describ (if Debtor does not have a record interest); .	Lot 26 of Nortl Range Central	and 27 in Block n 3/4 of the We 14, East of the	est Half of the third Prince	Section cipal M	ARK, a subdivis n 2, Township (leridian, West o bis 25-02-106-0	37, North, of Illinois