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Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 09/11/2018 11:55 AM Pg: 1 of 4

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

**Kelley Drye & Warren LLP
One Jefferson Road, Second Floor
Parsippany, New Jersey 07054
Attention: Paul A. Keenan, Esq.**

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 UCC 1Ad)

1a ORGANIZATION'S NAME SS GLENVIEW, LLC					
OR	1b INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIALS	SUFFIX
1c MAILING ADDRESS c/o National Storage Affiliates, 5200 DTC Parkway, Suite 200		CITY Greenwood Village	STATE CO	POSTAL CODE 80111	COUNTRY 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 UCC 1Ad)

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 NEW YORK LIFE INSURANCE COMPANY					
OR	3b INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c MAILING ADDRESS 51 Madison Avenue		CITY New York	STATE NY	POSTAL CODE 10010-1603	COUNTRY USA

4. **COLLATERAL**: This financing statement covers the following collateral:

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

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC 1Ad, 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/Bailee Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:

To be filed in the Official Records of Cook County, IL

International Association of Commercial Administrators (IACA)

FILING OFFICER COPY - UCC FINANCING STATEMENT (FORM UCC1) (REV. 04/2011)

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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 <input type="checkbox"/>					
OR	9a. ORGANIZATION'S NAME SS GLENVIEW, LLC				
	9b. INDIVIDUAL'S SURNAME				
	FIRST PERSONAL NAME				
	ADDITIONAL NAME(S) (INITIALS)			SUFFIX	
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY					
10. DEBTOR'S NAME: Provide (10a or 10b) only <u>one</u> 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:					
OR	10a. ORGANIZATION'S NAME				
	10b. INDIVIDUAL'S SURNAME				
	INDIVIDUAL'S FIRST PERSONAL NAME				
	INDIVIDUAL'S ADDITIONAL NAME(S) (INITIALS)			SUFFIX	
10c. MAILING ADDRESS					
		CITY	STATE	POSTAL CODE	COUNTRY
11. <input checked="" type="checkbox"/> ADDITIONAL SECURED PARTY'S NAME <u>or</u> <input type="checkbox"/> ASSIGNOR SECURED PARTY'S NAME: Provide only <u>one</u> name (11a or 11b)					
OR	11a. ORGANIZATION'S NAME THE PRUDENTIAL INSURANCE COMPANY OF AMERICA				
	11b. INDIVIDUAL'S LAST NAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S) INITIAL(S)	SUFFIX	
	11c. MAILING ADDRESS c/o Prudential Asset Resources, Inc., 2100 Ross Avenue, Suite 2500				
		CITY Dallas	STATE TX	POSTAL CODE 75201	COUNTRY USA
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral)					
13. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable)					
14. This FINANCING STATEMENT <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input checked="" type="checkbox"/> 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 EXHIBIT A ATTACHED HERETO.		
17. MISCELLANEOUS:					

International Association of Commercial Administrators (IACA)

FILING OFFICE COPY - UCC FINANCING STATEMENT ADDITIONAL PARTY (FORM UCC1Ad) (REV. 04/20/11)

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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 SS GLENVIEW, LLC	
OR	9b. INDIVIDUAL'S SURNAME	
	FIRST PERSONAL NAME	
	ADDITIONAL NAME(S) (INITIALS)	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) (INITIALS)	SUFFIX

10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

	11a. ORGANIZATION'S NAME VIP GP, LTD., for and on behalf of PGIM VIP Mortgage Account, L.P.			
OR	11b. INDIVIDUAL'S LAST NAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S) INITIAL(S)	SUFFIX

11c. MAILING ADDRESS c/o Prudential Asset Resources, Inc., 2100 Ross Avenue, Suite 2500	CITY Dallas	STATE TX	POSTAL CODE 75201	COUNTRY USA
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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 EXHIBIT A ATTACHED HERETO.

17. MISCELLANEOUS:

International Association of Commercial Administrators (IACA)

FILING OFFICE COPY - UCC FINANCING STATEMENT ADDITIONAL PARTY (FORM UCC1Ad) (REV. 04/20/11)

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File No. SS-IL8635

Property Name: Glenview

Exhibit "A"

Legal Description

Real property in the City of Glenview, County of Cook, State of Illinois, described as follows:

LOT 2 IN ISSC IV SUBDIVISION, BEING A SUBDIVISION OF THAT PART LYING EAST OF THE CENTERLINE OF MILWAUKEE AVENUE OF THE SOUTH 283.28 FEET OF LOT 12 (EXCEPT THE EAST 528.00 FEET THEREOF) IN COUNTY CLERK'S DIVISION OF SECTION 32, TOWNSHIP 42 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, RECORDED AS DOCUMENT 92604264 ON AUGUST 14, 1992, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office