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OLLOW IN	NANCING STATEMENT ISTRUCTIONS   X64 WI DO	∞195K ifal	ocuso				<b>  </b>		
	PHONE OF CONTACT AT FILER (option	130 (25° (45°			*18	32434 <b>05</b> 3*			
	THORE OF COMMON THE CONTRACTOR	,		;Doc# 18	3243	4053 Fee \$42.0	99		
B. E-MAIL (	CONTACT AT FILER (optional)			•			,		
				RHSP FEE:	\$9.00	RPRF FEE: \$1.00			
C. SEND A	CKNOWLEDGMENT TO: (Name and Ad	dress)		KAREM A. YARBROUGH					
Г		$\neg$ $\Box$	COOK COUNTY RECORDER OF DEEDS						
	er Hill Funding, LLC		'				L OF 3		
	5 Ponce de Leon Blvd., 5th F al Gables, ∂L 33146	ioor		DITTE -					
Cora	al Gables, 7L 55146		. 1	سيد سننيت		عادر و باستني استان مستقدستينسو پ			
				ABOVE SPAC	E IS FO	R FILING OFFICE USE O	DNLY		
DEBTO	R'S NAME: Provide only one Debtor name (1:	a or 1h) /use exact full no							
	not fit in line 1b, leave all of item . bi tok, check	here and provide the	e Individual Debtor information in ite	m 10 of the Fina	ancing St	etement Addendum (Form UC	C1Ad)		
1a. ORG	ANIZATION'S NAME		<u>.</u> .	<b></b>					
	mar Real Estate Investments, L'.C								
16. INDIV	VIDUAL'S SURNAME	Ox	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
Ic. MAILING	ADDRESS		CITY	_	STATE	POSTAL CODE	COUNTRY		
1356 Mer	rcer Ave	<b>C</b> '	East Point		GA	30344	USA		
c. MAILING	VIDUAL'S SURNAME  ADDRESS		FIRST PEF SO IAL NAME		STATE	NAL NAME(S)/INITIAL(S)  POSTAL CODE	COUNTR		
.c. Wiricht	1100.1200		1/4				USA		
SECUR!	ED PARTY'S NAME (or NAME of ASSIGNE	EE of ASSIGNOR SECUR	ED PARTY): Provide only one Sen	Party name	(3a or 3t	o)			
I	SANIZATION'S NAME								
<u> </u>				10			Louisen		
		1		V.V.	IADDITIO	NAL NAME(SY/INITIAL(S)	INDEED		
"`\ 3b. INDI\	VIDUAL'S SURNAME		FIRST PERSONAL NAME		L	MIT IN MICIONIC CONTRACTOR	3011111		
35. 1001				-4					
Sc. MAILING	ADDRESS		CITY	-4	STATE	POSTAL CODE	COUNTRY		
ــــا م	r Hill Funding, LLC	<del></del>		- (Q.	ADDITIO	NAL NAME(S)/INITIAL(S)	Isuff		
a. MAILING A4425 Por COLLATE All invention not li bother rigitelating to perfore exall fixture cools, pal any part embedde	ERAL: This financing statement covers the following equipment, accounts (Including imited to all promissory notes), let this to payment and performance, to the real property described on Extraction relating to the Property; all insurance refields of the Property and data on electronic media: and	owing collateral:  ng but not limited to ter-of-credit rights, and general intang thibit "A" attached l oil, gas, other mine gled goods relating unds relating to th y, and all equipme all supporting oblic	CITY Coral Gables  o all health-care-insurance letters of credit, documer gibles (including but not learned and made a part he erals and accounts constitute to the Property; all attach to the Property; and all access to property; all good will nt, inventory and softwar gations relating to the Property	e receivable nts, deposit limited to al ereof (the "P cuting as-ext diditions, rep relating to e to utilize, operty; all wi	s), characcoull softwore reacted ressions lacement the Pricreate, hether	ttel p? per, instrument nts, in. evan ent proper are and ell per ment y"); all oil, gas and otl collateral relating to t s, accessories, fittings ents of and substitution operty; all records a maintain and proces now existing or herea	USA  Is (includently, mo intangible property, increase one for a and data as any safter arise		
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#### UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS						
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State because Individual Debtor name did not fit, check here	ment; if line 1b was left blank					
9a. ORGANIZATION'S NAME						
E. Lamar Real Estate Investments, LLC						
OR 95. INDIVIDUAL'S SURNAME		<del></del> .				
	. III VI 30 (1 N N III L					
FIRST PERSONAL N/ME						
ADDITIONAL NAME(\$)/INIT AL(; )	SUFF					
ADDITIONAL NAME(S)INITIAL(; )	13077	<u>"</u>	THE ABOVE	SPACE	S FOR FILING OFFICE	USE ONLY
10. DEBTOR'S NAME: Provide (10a or Ob) only one additional Debtor	name or Debtor name that di	not fit in line				
do not omit, modify, or abbreviate any part of the C otor's name) and ent			4.000			
10a. ORGANIZATION'S NAME						
OR 10b. INDIVIDUAL'S SURNAME		·-				
No. No. 135 No. 155 No						
INDIVIDUAL'S FIRST PERSONAL NAME						
						SUFFIX
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	4					SOFFIX
10c. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
	0.					
	SIGNOR SECURED	ARTY'S I	NAME: Provide o	only one na	me (11a or 11b)	
11a. ORGANIZATION'S NAME		//X,				
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	ZIMAN Z		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY		0.	STATE	POSTAL CODE	COUNTRY
10 100 TO 11 100 TO 17 11 1 (0 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):				0,		
				9		
					Visc.	
					17/C	
					Co	
13. X This FINANCING STATEMENT is to be filed (for record) (or recorded REAL ESTATE RECORDS (if applicable)						- 6. A 68
15. Name and address of a RECORD OWNER of real estate described in item	X covers time 16 16. Description of		X covers as	extracted	collateral X is filed as	a fixture filing
(if Debtor does not have a record interest):	Exhibit A.					
					·····	<u> </u>
17. MISCELLANEOUS:						

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#### LEGAL DESCRIPTION

Order No.: 18GNW100019SK

For APN/Parcel ID(s): 20-18-214-022-0000

LOTS 25 AND 26 IN BLOCK 7 IN ASHLAND, A SUBDIVISION OF THE NORTH 3/4 AND THE NORTH 33.00 FEET OF THE SOUTH 1/4 OF THE EAST 1/2 OF THE NORTHEAST 1/4 (EXCEPT THE The FEET INCIPAL .

OPERATE OF COOPERATE OF COUNTY CLOSERY'S OFFICE OFF NORTH 16.4.00 FEET THEREOF) IN SECTION 18, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.