# INOFFICIAL COPY

#### **UCC FINANCING STATEMENT**

**FOLLOW INSTRUCTIONS** 

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)	
1562 52083 CSC	
801 Adlai Stevenson Drive Springfield, IL 62702	Filed In: Illinois (Cook)

#16757.7010m
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Doc# 1835313219 Fee \$42.00

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

EDWARD H. HOODY

	OLLATERAL: This financing statement covers the following collateral: If of the Debtor's right, title and interest, now exist and Lease No. 64052 between Debtor as Lesse ther claims and rights to payment and chattel papulating to the foregoing, and (iv) any other propert. Lessee's interest in the Equipment. For the purplescribed in item 12 of the UCC1Ad attached here earls and attachments, improvements and accessisted and attachments, improvements and accessisted and attachments. The PARTESSEE HAS NO RIGHT TO SELL OR PLEDGE ESSEE.  The public of applicable and check only one box: Collateral is held in a Trust check only if applicable and check only one box:  Public-Finance Transaction Manufactured-Home Transaction LTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	ee and Microf,LLC a er arising out of su y or rights to which oses of this financi to, and includes all ons thereto. THIS f TES CONSIDER T	Is Lessor,(ii) Ich Equipmenthe Lessee rang statement substitutions ILING IS FOUNTY IT IS OWNE	all insura at,(iii) all b may be or , "Equipm , replace R PREC, ACTION T D BY LE:  eing administer  C Check only if	nce, warranty, rerectooks, records and become entitled nent" shall be furth ments, upgrades, AUTIONARY AND TO BE A TRUE LESSOR AND LEAS	ntal and d proceeds by reason ner repairs, D EASE. SED TO  al Representative
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	OLLATERAL: This financing statement covers the following collateral:	*	risina in ana			<u>!</u>
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	Sa. ORGANIZATION'S NAME MICROF	DORED PARTY, Provide Unity	one set area i arty i	iaine (sa ui sp	9	
•	ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC	OUDED DADTY: S	2.00		3	1
٨	MAILING ADDRESS	CITY	<b>X</b> .	STATE	POSTAL CODE	COUNTRY
	Zb. INDIVIDUAL'S SURNAME	FIRST PER SON AL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
		C				
	ame will not fit in line 2b, leave all of item 2 blank, check here and provide an ORGANIZATION'S NAME	de ine individual Debtor inform	ation in item 10 of th	e Financing Sta	atement Addendum (Form U	CC1Ad)
	DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, 1					
	MAILING ADDRESS 4320 Wagman St	Oak Forest		STATE	POSTAL CODE 60452	USA
	Bain	John			I	
	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
1	1a. ORGANIZATION'S NAME					
	PEBTOR'S NAME: Provide only the Debtor name (1a or 1b) (use exact, fi ame will not fit in line 1b, leave all of item in the nk, check here and provide	ull name; do not omit, modify, d de the Individual Debtor inform				
					R FILING OFFICE USE	
	Springfield, IL 6270° Fi	iled In: Illinois (Cook)				
	CSC 801 Adlai Stevenson Drive					
	1562 52083	7	ν,	aic. ISAI	215019 93:99 bu t	PG: 1 0F 3
	SEND ACKNOWLEDGMENT TO: (Name and Address)		COOK COUNTY RECORDER OF DEEDS  DATE: 12/19/2018 03:00 PM PG: 1 OF 3			
_			COOK COUNTY DECORATE OF DECO			

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#### **UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS		•		
<ol> <li>NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State because Individual Debtor name did not fit, check here</li> </ol>	ement, if line 1b was left blank			
9a. ORGANIZATION'S NAME				
OR 95. INDIVIDUAL'S SURNAME				
Bain				
FIRST PERSONAL N ME				
John				
ADDITIONAL NAME(S)/INI* (AU( ))	SUFFIX			
			S FOR FILING OFFICE	
<ol> <li>DEBTOR'S NAME: Provide (10a or Ob) on'y one additional Debtor do not omit, modify, or abbreviate any part of the Public's name) and en</li> </ol>		line 1b or 2b of the Financing 5	tatement (Form UCC1) (use	exact, full name
10a. ORGANIZATION'S NAME	ter the maining desires to mile the			
OR 10b. INDIVIDUAL'S SURNAME		· · <del></del> .		
INDIVIDUAL'S FIRST PERSONAL NAME	0	······································		
INDUSTRIALIO ADDITIONAL MANE (OVINITIALIO)				Teuren
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	4			SUFFIX
0c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
		[5,7,15]		
1. ADDITIONAL SECURED PARTY'S NAME or AS	SSIGNOR SECURED FARTY	S NAME: Provide only one na	me (11a or 11b)	
11a, ORGANIZATION'S NAME	7x	<u> </u>		
DR				
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
ANNUAL APPROPRIE	OLTY	STATE	POSTAL CODE	COUNTRY
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COONIKI
2 ADDITIONAL SPACE FOR ITEM 4 (Collateral):		<del></del>		
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral): CARRIER Furnace M# 59TP6A080E1716 S#	3917A51248	',0		
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3 This FINANCING STATEMENT is to be filed for record for recorder	N in the 114 This FINANCING STATE	MENT:	0,5,100	
This FINANCING STATEMENT is to be filed [for record] (or recorded REAL ESTATE RECORDS (if applicable)	I) in the 14. This FINANCING STATE			fixture filing
5. Name and address of a RECORD OWNER of real estate described in item	covers timber to be a	cut covers as-extracted		fixture filing
	n 16 16. Description of real estate See attached Exhi	cut covers as-extracted of covers as-extracte		fixture filing
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LOT 328 IN FIELDCREST FIFTH ADDITION, A RESUBDIVISION OF LOTS 2 THROUGH 27 INCLUSIVE IN BLOCK 12; LOTS 2 THROUGH 28 INCLUSIVE IN BLOCK 13; LOTS 2 THROUGH 31 INCLUSIVE IN BLOCK 14; AND LOTS 1 THROUGH 18 INCLUSIVE IN BLOCK 15 IN WILLOWICK ESTATES, BEING A SUBDIVISION OF PART OF THE SOUTHWEST 1/4 AND PART OF THE SOUTH EAST 1/4 NORTH OF THE INDIAN BOUNDARY LINE OF SECTION 22, TOWNSHIP 36 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO PLAT OF SAID PTH Y, ILLIN
OF COOK COUNTY CLORES OFFICE FIELDCKFST FIFTH ADDITION REGISTERED IN THE OFFICE OF THE REGISTRAR OF TITLES OF COOK COUNTY, ILLINOIS, ON OCTOBER 3, 1962 AS DOCUMENT 2058774, IN COOK COUNTY, ILLINOIS.