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EDWARD M. HOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 06/18/2019 12:37 PM PG: 1 OF 3

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)  
Phone: (800) 331-3282 Fax: (818) 662-4141

B. E-MAIL CONTACT AT FILER (optional)  
CLS-CTLS\_Glendale\_Customer\_Service@wolterskluwer.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address) 15602 - US BANK

Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	70344009 ILIL FIXTURE
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File with: Cook, IL

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 UCC1Ad)

1a. ORGANIZATION'S NAME  
DEVON MANAGEMENT, LLC

OR

1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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1c. MAILING ADDRESS

6346 N CLARK ST	CITY CHICAGO	STATE IL	POSTAL CODE 60660	COUNTRY USA
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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 UCC1Ad)

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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2c. MAILING ADDRESS

	CITY	STATE	POSTAL CODE	COUNTRY
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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  
U.S. Bank Equipment Finance, a division of U.S. Bank National Association

OR

3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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3c. MAILING ADDRESS

1310 Madrid Street	CITY Marshall	STATE MN	POSTAL CODE 55258	COUNTRY USA
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4. COLLATERAL: This financing statement covers the following collateral:

- 6- FLEXPAY IV GRIND RF KIT W/5.7" SCREEN;
- 6- FLEXPAY IV RETROFIT KIT - 1 PER DISPLAY;
- BACKROOM COMMUNICATIONS MODULE ;
- HOFFMANN GEOLINER WHEEL ALIGNMENT COMP WNIN READ ;
- ROBINAIR AC RECOVER RECYCLE RECHARGE MACHINE ;
- HOFFMAN MONTY 1620 24" SWING ARM TIRE CHANGER;
- HOFFMAN GEODYNA 9000P WHEEL BALANCER;

TOGETHER WITH ALL REPLACEMENTS, PARTS, REPAIRS, ADDITIONS, ACCESSIONS AND ACCESSORIES INCORPORATED THEREIN OR AFFIXED OR ATTACHED THERETO AND ANY AND ALL PROCEEDS OF THE FOREGOING, INCLUDING, WITHOUT LIMITATION, INSURANCE RECOVERIES.

5. Check only if applicable and check only one box: Collateral is  held in a Trust (see UCC1Ad, 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/Bailor  Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:  
70344009 3000009057 2516227

SPS  
M  
SCY  
EY  
INTDk

**UNOFFICIAL COPY****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

OR	9a. ORGANIZATION'S NAME DEVON MANAGEMENT, LLC	
	9b. INDIVIDUAL'S SURNAME	
	FIRST PERSONAL NAME	
	ADDITIONAL NAME(S)/INITIAL(S)	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

OR	10a. ORGANIZATION'S NAME				
	10b. INDIVIDUAL'S SURNAME				
	INDIVIDUAL'S FIRST PERSONAL NAME				
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
10c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

11.  ADDITIONAL SECURED PARTY'S NAME *or*  ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

OR	11a. ORGANIZATION'S NAME			
	11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE

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):

IMPERIAL MANAGEMENT, INC.  
6346 N Clark St  
CHICAGO, IL 60660

16. Description of real estate:

Parcel ID:  
14-06-204-013-0000

LEGAL LAND DESCRIPTION FOR:  
6346 N Clark St  
Chicago, IL 60660-1215

LOTS 1, 2 AND 3 IN BLOCK 1 IN COLUMBIAN LAND  
[ See Exhibit for Real Estate ]

17. MISCELLANEOUS: 70344009-IL-31 15602 - US BANK BUSINESS EQU

U.S. Bank Equipment Finance, a division File with: Cook, IL

3000009057 2516227

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**Debtor:** DEVON MANAGEMENT, LLC

## Exhibit for Real Estate

**16. Description of real estate:** Continued

ASSOCIATION ADDITION TO HIGH RIDGE IN THE  
NORTHEAST  $\frac{1}{4}$  OF SECTION 6, TOWNSHIP 40  
NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL  
MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL 2:

LOTS 4 AND 5 IN BLOCK 1 IN COLUMBIAN LAND  
ASSOCIATION ADDITION TO HIGH RIDGE IN THE  
NORTHEAST  $\frac{1}{4}$  OF SECTION 6, TOWNSHIP 40  
NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL  
MERIDIAN

ALSO KNOWN AS

LOTS 4 AND 5 IN THE SUBDIVISION BY THE  
COLUMBIAN LAND ASSOCIATION OF ORIGINAL LOT  
1 IN BLOCK 1 IN HIGH RIDGE SUBDIVISION IN THE  
NORTHEAST  $\frac{1}{4}$  OF SECTION 6, TOWNSHIP 40,  
RANGE 14, EAST OF THE THIRD PRINCIPAL  
MERIDIAN, IN COOK COUNTY, ILLINOIS.

ADDRESS: 6346 NORTH CLARK STREET, CHICAGO,  
IL (#1907)

TAX NUMBERS: 14-06-204-012-0000,  
14-06-204-013-0000, and 14-06-204-014-0000