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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS	<u>80</u>	1/1485	LL	SOF	
A. NAME & PHONE OF CONTACT					
Natasha Gandhi, Esq.	214-74	0-1470			
B. E-MAIL CONTACT AT FILER (o	ptional)				
ngandhi@bellnunnally.	.com				
C. SEND ACKNOWLEDGMENT T	D: (Nam	e and Address	;)		
Bell Nunnally & Mar	tin LL	P		_	٦İ
2323 Ross Avenue, So	uite 190)0			
Dallas, TX 75201					
					1

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Doc# 1921845074 Fee \$88.00

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

EDHARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

	ND ACKNOWLEDGMENT TO: (Name and Address)		DATE:	08/06/2	019 01:37 PM PG:	1 OF 3
- 1	Bell Nunnally & Martin LLP	7 [
1	2323 Ross Avenue, Suite 1900	1				
	Dallas, TX 75201					
	Danas, 174 75201					
1		1 1			•	
		-	HE ABOVE \$1	PACE IS FO	OR FILING OFFICE USE	ONLY
DE	BTOR'S NAME: Provide or y on Debtor name (1a or 1b) (use exact, full					
	e will not fit in line 1b, leave all of it a 1 plank, check here and provide	the Individual Debtor information	in item 10 of the	Financing S	tatement Addendum (Form U	CC1Ad)
1a	ORGANIZATION'S NAME		-			
	IANNHEIM HOTEL, LLC					
ച	INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	SUFFIX	
Lo. 140	LING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
	5 Point Boulevard, Suite 125	Elgin		IL	60123	USA
		1			J	
	BTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, rull)	name; do not omit, modify, or ab	breviate any part	of the Debto	r's name); if any part of the l	ndividual Debtor's
nam	e will not fit in line 2b, leave all of item 2 blank, check here and provide	Individual Debtor information	in item 10 of the	e Financing S	tatement Addendum (Form L	CC1Ad)
2a	ORGANIZATION'S NAME	4				
OR 2b	INDIVIDUAL'S SURNAME	FIRST I ERSO VAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
		TO .				
2c. MA	LING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
		40.				
	NUDED BARTYS MANEY MASS A ASSISTANCE A ASSISTANCE OF THE STATE OF THE	TES DARRY. Periode cell year	Convend Dodge		ы	
	CURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECL	RED PARTY): Provide only <u>on</u> s		iame i sa oi s		
	ORGANIZATION'S NAME		Gr Great dity i		-,	
3a	ORGANIZATION'S NAME				-, <u>-</u>	
3a F:	ALL DES PLAINES, LLC	FIRST PERSONAL NAME	C			SUFFIX
3a F:		FIRST PERSONAL NAME	C		DNAL NAME(S)/INITIAL(S)	SUFFIX
OR 3b	ALL DES PLAINES, LLC INDIVIDUAL'S SURNAME		C	ADDITIO	DNAL NAME(S)//NITIAL(S)	
OR 3b	INDIVIDUAL'S SURNAME LING ADDRESS	CITY	<u>C</u>	ADDITIO	DNAL NAME(S)//INITIAL(S)	COUNTRY
3a F 3b Ic. MA 232	INDIVIDUAL'S SURNAME LING ADDRESS 3 Ross Avenue, Suite 200 LATERAL: This financing statement covers the following collateral:	CITY Dallas	C	ADDITION	POSTAL CODE 75201	
3a F 3b 3c MA 232	IALL DES PLAINES, LLC INDIVIDUAL'S SURNAME LING ADDRESS 3 Ross Avenue, Suite 200	CITY Dallas	C	ADDITION	POSTAL CODE 75201	COUNTRY
3a H 3b 3b 3c 3c MA 232 3c COL All 2	INDIVIDUAL'S SURNAME LING ADDRESS 3 Ross Avenue, Suite 200 LATERAL: This financing statement covers the following collateral: assets of Debtor, including, without limitation, the	CITY Dallas	ed on Exhi	TX	POSTAL CODE 75201	COUNTRY
3a H 3b 3c C. MA 232 A 1 COL A 1 I 2	INDIVIDUAL'S SURNAME LING ADDRESS 3 Ross Avenue, Suite 200 LATERAL: This financing statement covers the following collateral: assets of Debtor, including, without limitation, the	Dallas real property describ	ed on Exhi	TX bit A att	POSTAL CODE 75201 acher reto.	COUNTRY USA
3a H 3b 3c MA 232 A 1 COL AII 2	INDIVIDUAL'S SURNAME LING ADDRESS 3 Ross Avenue, Suite 200 LATERAL: This financing statement covers the following collateral: assets of Debtor, including, without limitation, the	Dallas real property describ	ed on Exhi	bit A att	POSTAL CODE 75201 acher receto.	COUNTRY USA
January Control of the Control of th	ALL DES PLAINES, LLC INDIVIDUAL'S SURNAME LING ADDRESS 3 Ross Avenue, Suite 200 LATERAL: This financing statement covers the following collateral: assets of Debtor, including, without limitation, the section of Debtor, including, without limitation, the section of Debtor including is applicable and check only one box: Collateral is held in a Trust ack only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction	Dallas real property describ	ed on Exhi	bit A att	POSTAL CODE 75201 acher hareto. ered by a Decedent's Person if applicable and check only situral Lien Non-UCC	COUNTRY USA

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:	6b. Check only if applicable and check only one box;
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessce/Lessor Consignee/Consignor Seller/Buye	er Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: 12041.3	

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FOLLOWINSTRUCTIONS	CIVI				
9. 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 15 was left blank				
9a. ORGANIZATION'S NAME MANNHEIM HOTEL, LLC					
9b. INDIVIDUAL'S SURNAME		,			
FIRST PERSONAL NA . E					•
ADDITIONAL NAME(S)/INITI/ L(S)	SUFFIX	THE ABOVE	SPACE	IS FOR FILING OFFIC	E USE ONLY
10. DEBTOR'S NAME: Provide (10a or 16 o) 6ly one additional Debtor and not omit, modify, or abbreviate any part of the Deptor's name) and enter			Financing §	Statement (Form UCC1) (L	ise exact, full name;
10a. ORGANIZATION'S NAME		- ''			
OR 10b, INDIVIDUAL'S SURNAME	<u> </u>		· · · · · · · · · · · · · · · · · · ·		
INDIVIDUAL'S FIRST PERSONAL NAME	0				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	7		-		SUFFŧX
10c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME or AS	SIGNOR SECURELY PA	PTY'S NAME: Provide	only <u>one</u> n	ame (11a or 11b)	
11a. ORGANIZATION'S NAME		1%			
OR 11b, INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	ME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	(0)	STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):			15	· · · · · · · · · · · · · · · · · · ·	<u></u>
			0,	OFFICO	
13. This FINANCING STATEMENT is to be filed [for record] (or recorded REAL ESTATE RECORDS (if applicable)) in the 14. This FINANCING S		-extracted	collateral	s a fixture filing
15. Name and address of a RECORD OWNER of real estate described in item (if Debtor does not have a record interest):		attached hereto a	nd inco	prporated herein	by
		·			
17 MISCELIANEOUS:					

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EXHIBIT A

LOT 1 IN FAIRFIELD INN SUBDIVISION, BEING A SUBDIVISION OF PART OF THE SOUTHWEST QUARTER OF THE SOUTHEAST QUARTER OF SECTION 29, TOWNSHIP 41 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED MARCH 12, 2018 AS DOCUMENT NUMBER 1807145058, IN COOK COUNTY, ILLINOIS.

RECORDER OF DEEDS

COOK COUNTY RECORDER OF DEEDS