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1923517126

UCC FINANCING STATEMENT	D)oc# 1923517126 Fee \$88.00	1				
FOLLOWINSTRUCTIONS	0.	Hen ser					
A. NAME & PHONE OF CONTACT AT FILER (optional)		HSP FEE:\$9.00 RPRF FEE: \$1.00	•				
Frederick C. C. Boyd, III, Esq. 404/233-7000		DWARD M. MOODY					
B. E-MAIL CONTACT AT FILER (optional)	CC	DOK COUNTY RECORDER OF DEEDS					
fcb@mmmlaw.com	DA	DATE: 88/23/2010 02:54 BV					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		00/23/2019 03:51 PM PG: 1 0	r 3				
Frederick C. C. Boyd, III, Esq.							
Morris Manning & Martin, LLP	` !		_ _				
1600 Atlanta Financial Center							
3343 Peachtree Road, NE	. [
Atlanta, GA 30326							
	THE A	ABOVE SPACE IS FOR FILING OFFICE USE O	NLY				
1, DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact name will not fit in line 1b, leave all of norm in blank, check here and provide and provide in the control of the co	The state of the s	ate any part of the Debtor's name); if any part of the Inc m 10 of the Financing Statement Addendum (Form UC					
1a. ORGANIZATION'S NAME CAVE ENTERPRISES CPERATIONS,	LLC						
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX				
1c. MAILING ADDRESS 1624 W. 18th St.	Chicago	STATE POSTAL CODE IL 60608	USA				
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use e.act	fr." name: do not omit, modify, or abbrevia	ate any part of the Debtor's name); if any part of the Ind	lividual Debtor's				
· · · · · · · · · · · · · · · · · · ·		m 10 of the Financing Statement Addendum (Form UC					
2a, ORGANIZATION'S NAME	70						
OR			···				
25. INDIVIDUAL'S SURNAME	FIRST FEP 300 IAL 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 S	SECURED PARTY): Provide grily one Sec	Party name (3a or 3b)					
3a. ORGANIZATION'S NAME							
WELLS FARGO BANK, NATIONAL A	SSOCIATION, as Adu	nivistrative Agent					
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX				
	CITY	ST. U.S. POSTAL CODE	COUNTRY				
3c. MAILING ADDRESS 1700 Lincoln St., 3rd Floor, MAC C7300-033	Denver	ST U.S. POSTAL CODE 80203-4500	USA				
	Denver	203 4500	COIL				
4. COLLATERAL: This financing statement covers the following collateral: All goods of the Debtor that are or are to become fix hereto (the "Land"), whether now owned or hereaf							
Land.			e A				
		C	3				
Property Location - Store No. 21231 - 2599 W. Higg	gins Rd., Hoffman Estates, C	Cook County, 60169	S_^ P∰				
			P 2				
			S Y				
			IVI				
			M_ SC_				

5. Check only if applicable and check only one box: Collateral is hel	d in a Trust (see UCC1Ad, item 17 an	d Instructions)	being administered by a De	ecedent's Personal Representa
6a. Check only if applicable and check only one box:			6b. Check only if applicable	
Public-Finance Transaction Manufactured-Home Transaction	saction A Debtor is a Tran	smitting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor	Seller/Buy	er Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: Cook County, Illinois Filing	CID No: 000034986	MM&M	File No. 18263/11	2695
		ام د مثار م مدا	Association of Commi	araial Administrators (IACA)

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS					
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statem because Individual Debtor name did not fit, check here	ent; if line 1b was left blank	7			
9a. ORGANIZATION'S NAME					
CAVE ENTERPRISES OPERATIONS,	LLC				
OR 95. INDIVIDUAL'S SURNAME		-			
FIRST PERSONAL N/ NC					
ADDITIONAL NAME(S), INIT.AL'S)	SUFFIX				
96		THE ABOV	/E SPACE	IS FOR FILING OFFICE	USE ONLY
10. DEBTOR'S NAME: Provide (10a or (Ch) only one additional Debtor na	me or Debtor name that did not				
do not omit, modify, or abbreviate any pan of the Protor's name) and enter					
10a, ORGANIZATION'S NAME					
OR 10b. INDIVIDUAL'S SURNAME	•	•			
TOU. INDIVIDUAL S CONTAINE					
INDIVIDUAL'S FIRST PERSONAL NAME			· · · · ·		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	OZ.				SUFFIX
				Janeary ages	20111701
10c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME or ASS	IGNOR SECURED PAR	TY'S NAME: Provid	le only one n	ame (11a or 11b)	
11a. ORGANIZATION'S NAME	1011011 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1) -		(1/2 0/ 1/2)	
OR					
11b. ÎNDIVIDUAL'S SURNÂME	FIRST PERSONAL NAM	IE .	ADDITIO	ONAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	0	STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):					
12. ADDITIONAL OF NOC. 1 STATE (SCHOOLS).			0.1		
			0		
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				IFIC.	
				'C	
				0	
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in	n the 14. This FINANCING ST	ATEMENT:			
REAL ESTATE RECORDS (if applicable)	covers timber to		as-extracted	collateral 📝 is filed as a	a fixture filing
15. Name and address of a RECORD OWNER of real estate described in item 1 (if Debtor does not have a record interest):	6 16. Description of real e	state;			
	See Exhibit "A"	" attached here	to		
JHGV LLC					
1624 W. 18th Street					
Chicago, Illinois 60608					
				•	
47 MOOGU ANEQUIO					
17. MISCELLANEOUS:					

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Store No. 21231 2599 W. Higgins Rd. Hoffman Estates, Illinois 60169 **Cook County**

Exhibit "A"

Description of Real Property

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

Lot 1 in Bulge. King Subdivision, being that part of the Northwest Fractional Quarter of Section 7, Township 41 North, Range 10 East of the Third Principal Meridian, according to the plat of subdivision recorded March 11, 2015 as document 1507029002, in Cook County, Illinois. in, in or-or-.

Cook County Clark's Office

Parcel Identification Number: 07-07-100-038-0000 Vol. 187