## **UNOFFICIAL COPY**



Doc# 1924101050 Fee \$93.00

DRIE: 08/29/2019 02:44 PM PG: 1 Control of Filler (optional) NASH-MARTIN 713-852-3595 TACTAT FILER (optional) NASH-MARTIN 713-852-3595 TACTAT FILER (optional) OWLEDGMENT TO: (Name and Address)  PRETENWAY PLAZA, SUITE 700 FON, TX 7/0-46  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR		RHSP FEE:\$9.00 RPRF FEE: \$1.00
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IAL'S SURNAME  JAL'S FIRST PERSONAL NAME  JAL'S ADDITIONAL NAME(S)/INITIAL(S)  DRESS  CITY  STATE POSTAL CODE  COUNTRY  ERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral	OR 6b. INDIVIDUAL'S SURNAME FIRST PER	SONAL NAME (S)/INITIAL(S)
JAL'S FIRST PERSONAL NAME  JAL'S ADDITIONAL NAME(S)/INITIAL(S)  DRESS  CITY  STATE POSTAL CUDE  COUNTRY  ERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral	7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - pro	wide only one name (7a or 7', (use e) act, full name, do not omit, modify, or abbreviate any part of the Debtor's name)
JAL'S FIRST PERSONAL NAME  JAL'S ADDITIONAL NAME(S)/INITIAL(S)  DRESS  CITY  STATE POSTAL CODE  COUNTRY  ERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral	7a. ORGANIZATION'S NAME	
DRESS CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral	OR 7b, INDIVIDUAL'S SURNAME	7-
DRESS  CITY  STATE POSTAL CODE  COUNTRY  ERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral	INDIVIDUAL'S FIRST PERSONAL NAME	50
DRESS  CITY  STATE POSTAL CODE  COUNTRY  ERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral		
ERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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ollateral:	8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral	DELETE collateral RESTATE covered collateral ASSIGN collateral
	Indicate collateral:	
	8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral	
		S
S		
S <sub>2</sub>		

If this is an Amendment authorized by a DEBTOR, check here | and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME STATE FARM LIFE INSURANCE COMPANY OR 9b, INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

HFF LOAN # 100007290 TO BE RECORDED IN COOK COUNTY, IL

1924101050 Page: 2 of 3

## **UNOFFICIAL COPY**

_	CC FINANCING STATEMENT AMENDMEN  LOWINSTRUCTIONS	TADDENDUM		
11,	INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on AI 1434304018 FIELD: 12/9/2014	menament form		
12.	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 o	n Amendment form		
	12a. ORGANIZATION'S NAME STATE FARM LIFE INSURANCE COMPANY			
		,		
OR	12b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAME			
	ADDITIONAL NAME(S)/INITIA_(S)	SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE L	ISE ONLY
13.	Name of DEBTOR on related financing stat any nt (Name of a current Debone Debtor name (13a or 13b) (use exact, full name so not omit, modify, or abbri			13): Provide only
	13a ORGANIZATION'S NAME THE SHOPS AT KINGSBURY SQUARE,	LLC		
OR		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
14	ADDITIONAL SPACE FOR ITEM 8 (Collateral):			
15.	This FINANCING STATEMENT AMENDMENT:	17. Descriptio	on of real estate:	
16.	covers timber to be cut covers as-extracted collateral list filled a Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):	ss a fixture filing See Exh.	ibit B	

TO BE RECORDED IN COOK COUNTY, IL

HFF LOAN # 100007290



## **EXHIBIT B**

to Financing Statement by, THE SHOPS AT KINGSBURY SQUARE, LLC, an Illinois limited liability company, as Debtor and STATE FARM LIFE **INSURANCE COMPANY**, as Secured Party

## Legal Description of Real Estate

LOTS 1 THROUGH 12, INCLUSIVE, IN BLOCK 46 IN CHICAGO LAND COMPANY'S RESUBDIVISION OF BLOCKS 36, 37, 46, 47, 48, 55, 56, 62, 63, 70, 71, 74 AND 84 TOGETHER WITH LOT 1 IN BLOCK 50, ALL IN ELSTON ADDITION TO CHICAGO, BEING A SURDIVISION OF PART OF SECTION 5, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF FILED FOR RECORD MAY 26, 1873 AND RECORDED JUNE 11, 1873 IN BOOK 4 OF PLATS ON PAGE 43 AS DOCUMENT NUMBER 104948, IN COOK COUNTY, ILLINOIS.

PINs: 17-05-212-001-0000 17-05-212-002-0000 17-05-212-003-0000 17-05-212-004-0000 17-05-212-005-0000 17-05-212-006-0000 17-05-212-007-0000 17-05-212-008-0000 17-05-212-009-0000

17-05-212-010-0000

Cook Colling 142 Clarks Office Street Address: 1550 N. Kingsbury Street, Chicago, IL 60642