## **UNOFFICIAL COPY**

CC FINANCING STATEMENT DLLOW INSTRUCTIONS  NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294					
DLLOW INSTRUCTIONS  . NAME & PHONE OF CONTACT AT FILER (optional)					
DLLOW INSTRUCTIONS  . NAME & PHONE OF CONTACT AT FILER (optional)			×192	5616047*	<b>.,</b>
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UUU 1-000-000-0234				PRF FEE: \$1.00	:
. E-MAIL CONTACT AT FILER (optional)		EDHARD M.			i
SPRFiling@cscglobal.com				DER OF DEEDS	-
SEND ACKNOWLEDGMENT TO: (Name and Address)		DATE: 09/1	3/2019	02:48 PM PG: 1	OF 8
1697 36030	$\neg$				
CSC 801 Adlai Stevenson Drive					
Springfold II 62701	iled In: Illinois				
	(Cook)				
<u> </u>		THE ABOVE SPA	CE IS FO	R FILING OFFICE USE	ONLY
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, the name will not fit in line 1b, leave all of item or blank, check here. and provide name will not fit in line 1b, leave all of item or blank, check here.	full name; do not omit, modify, de the Individual Debtor inforn				
1a. ORGANIZATION'S NAME C & Z FIT. I CC	de tre maivadar Debior triori	audit is item 10 of the Fil	anding Sta	stement Addendani (Form O	- COTAU)
IN STORMIZATIONS HAME C & Z FIT, 1215					
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	<i>,</i>	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS 124 EDDY LN	NORTHFIELD		STATE IL	POSTAL CODE 60093	COUNTRY
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact,	uff rame: do not omit, modify.	or abbreviate any part of t	he Debtor	s name); if any part of the Ir	
	dr .hr. Individual Debtor inform				
2a, ORGANIZATION'S NAME C & Z FIT II, LLC					
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2b. INDIVIDUAL'S SURNAME	FIRST PEF SON AL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
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Agricultural Lien

Bailee/Bailor

Licensee/Licensor

1697 36030

Seller/Buyer

Lessee/Lessor

Consignee/Consignor

7. ALTERNATIVE DESIGNATION (if applicable):

8. OPTIONAL FILER REFERENCE DATA: :40342116

1925616047 Page: 2 of 8

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	10a. ORGANIZATION'S NAME C & Z FIT III, LLC					
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, ,	ADDITIONAL SPACE FOR ITEM 4 (Collateral):			<b>/</b>	<u></u>	
ns All Se	ch Collateral under a sublease, rental or simila surance and sale proceeds) and product of the assets of Grantor, whether now owned or here ecured Party as security for obligations to Secur TNESS STORE #0646 LOCATED AT 20393 N	foregoing, whether it the eafter acquired, where red Party, the equipme	be cash, non-cever located,the ent and other c	asn or e Gran	in any other form tor heroby pledge	s to
3. [	▼ This FINANCING STATEMENT is to be filed [for record] (or recorded) i REAL ESTATE RECORDS (if applicable)	n the 14. This FINANCING STAT	_	extracted o	collateral 🚺 is filed as a	fixture filing
6 6	lame and address of a RECORD OWNER of real estate described in item 1 if Debtor does not have a record interest): IRILLON SQUARE LLC 11 WEST DIVISION, STUITE 202 HICAGO IL 60622	6 16. Description of real esta SEE ENCLOSED CENTER, COOK 04-26-400-071-00	EXHIBIT B D COUNTY, IL,	PARC	EL NUMBER:	PPING

1925616047 Page: 3 of 8

### **UNOFFICIAL COPY**

#### UCC FINANCING STATEMENT ADDENDUM **FOLLOW INSTRUCTIONS** 9. NAME OF FIRST DEBTOR: Same as tine 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME C & Z FIT, LLC 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL 1 AME ADDITIONAL NAME(S)/INI (IAL S) SUFFIX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10) 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 Uebtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME OF 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS COUNTRY POSTAL CODE ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED FARTY'S NAME: Provide only one name (11a or 11b) 11a, ORGANIZATION'S NAME OF 11b, INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): along with the following additional collateral including but not limited to: all accounts, receivables, general intangibles, life and other insurance policies, chattel paper, leases, subleases, deposit accounts, letter of codit rights, supporting obligations, documents, computer equipment (hardware and software), software licenses, in strucents, goods, equipment, machinery, inventory, tools, building materials, furniture, fixtures, furnishings, commercial tort claims, books and records (whether written or stored electronically) as well as all other personal property in the russession or control of the Grantor wherever located, now owned or hereafter acquired along with all personal property install o in, affixed to 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 16. Description of real estate: (if Debtor does not have a record interest);

FILING OFFICE COPY — UCC FINANCING STATEMENT ADDENDUM (Form UCC1Ad) (Rev. 04/20/11)

17. MISCELLANEOUS:

1925616047 Page: 4 of 8

### **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 9a. ORGANIZATION'S NAME C & Z FIT, LLC 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL MAME ADDITIONAL NAME(S)/INI (IAL) S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10c) 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 Unbtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS POSTAL CODE COUNTRY ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED FARTY'S NAME: Provide only one name (11a or 11b) 11a, ORGANIZATION'S NAME OF 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral) and/or used in connection therewith together with all present or future (i) additions, accessories, accessions, attachments, parts, supplies, related software, intellectual property, rights, licenses and improvements thereto; (ii) substitutions, renewals, replacements and purchase options thereof; (iii) insurance, warrant, and other third-party claims; (iv) Grantor's rights in connection with a third-party's use of such Collateral under a subleade, rental or similar agreement; and (v) forms of proceeds (including but not limited to insurance and sale proceeds) and product of the foregoing, whether it be cash, non-cash or in any other form. All assets of Grantor, whether now owned or hereafter 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 16. Description of real estate: (if Debtor does not have a record interest) 17. MISCELLANEOUS:

1925616047 Page: 5 of 8

## **UNOFFICIAL COPY**

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	VERWOODS, IL 60015, ong with the following additional collatera	Lincluding but no	it limited to: all a	accounts r	eceiva	; hler, doneral inta	naibles
	and other insurance policies, chattel pa						
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### UCC FINANCING STATEMENT ADDENDUM

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9a. ORGANIZATION'S NAME					
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OR 9b. INDIVIDUAL'S SURNAME					
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10. DEBTOR'S NAME: Provide (10a or 10c) only one additional Debt	or name or Debtor name that did not fit in	ine 1b or 2b of the Fi	nancing 9	Statement (Form UCC1) (use	exact, full name;
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DR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
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12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):				<u> </u>	
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and records (whether written or stored electron	• • •		-		
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and/or used in connection therewith together vattachments, parts, supplies, related software,					· /ii\
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substitutions, renewals, replacements and pur	chase options thereof, (iii)	ilisurance, we	arrant	y and other third-p	arty
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1925616047 Page: 7 of 8

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### **UCC FINANCING STATEMENT ADDENDUM**

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OR 11b, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
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12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		<del></del>	l .	·
<ul> <li>claims; (iv) Grantor's rights in connection with a</li> </ul>				
agreement; and (v) forms of proceeds (including	g but not limited to insuran	ce and sale proce	eರ್ವ) and product o	of the
foregoing, whether it be cash, non-cash or in ar	ny other form.		Usc.	
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17. MISCELLANEOUS:				

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#### **EXHIBIT B**

### **DESCRIPTION OF SHOPPING CENTER**

IN CARILLON SQUAN.
WILLIAM REED'S SUBDIV.
SHIP 42 NORTH, RANGE 12, L
ITY, ILLINOIS.

RECORDER OF DEEDS

RECORDER

82403318\V-5