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UCC FINANCING STATEMENT			EDH	EDWARD M. MOODY		
FOLLOWINSTRUCTIONS			C00	COOK COUNTY RECORDER OF DEEDS		
A. NAME & PHONE OF CONTACT AT FILER (optional)			DATE: 12/31/2019 11:23 AM PG:			
B. E-MAIL CONTACT AT FILER (optional)			×			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
Akerman LLP						
666 Fifth Avenue, 20th Floor	•					
New York, New York 10103						
Attn: Samuel S. Lee, Esq.						
	1			~		
		THE ABOVE SPA	CE IS FO	R FILING OFFICE USE	ONLY	
1. DEBTOR'S NAME: Provide only one Jebtor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of item 1 Nr nk, check here and provide		modify, or abbreviate any part of or information in item 10 of the Fi				
1a. ORGANIZATION'S NAME TGA Bedford Park LLC		1				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
c/o Nuveen Real Estate, 2300 N. Field St., Suite 1659	Dallas		TX	75201	USA	
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, 'ull name will not fit in line 2b, leave all of item 2 blank, check here and provide 2a, ORGANIZATION'S NAME		modify, or abbreviate any part of or information in item 10 of the Fi				
-	( )					
OR 2b, INDIVIDUAL'S SURNAME	FIRST PEF SON AL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY	771	STATE	POSTAL CODE	COUNTRY	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED	JRED PARTY): Pro	vide only one Ser ared l'arty nam	ne (3a or 3b	)	<u></u>	
3a. ORGANIZATION'S NAME				· · · · · · · · · · · · · · · · · · ·		
New York Life Insurance Company						
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	DDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
51 Madison Avenue	New York		NY	16910	USA	
4. COLLATERAL: This financing statement covers the following collateral:  All assets of Debtor now owned or hereafter acquired and made a part hereof.	with respect	to the Property descr	ibed on	Exhibit A attached	d hereto	
OCH11906065 C13/3 CB						

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 <u>only</u> if applicable and check <u>only</u> one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Bu	yer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: Cook County (Debtor: TGA Bedford Park LLC)	•

1936541033 Page: 2 of 4

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#### UCC FINANCING STATEMENT ADDENDUM

THE ADOLE		10 FOR FILLING OFFI	OF HOE ONLY
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1936541033 Page: 3 of 4

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## EXHIBIT A LEGAL DESCRIPTION

Lot 1 in Bedford Park Commerce Center I and II, being part of the Northwest 1/4 of Section 28, Township 38 North, Range 13, East of the Third Principal Meridian, according to the plat thereof recorded September 21, 2005 as Document No. <u>0526439064</u>, in Cook County, Illinois.

Property of Cook County Clark's Office

1936541033 Page: 4 of 4

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PINS: 19 28 200 033

19 28 200 034

ADDRESS:

5139 W 73RD STREET

BEDFORD PARK IL 60638

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COOK COUNTY
RECORDER OF DEEDS