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Doc# 2017015035 Fee \$93.00

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

POSTAL CODE

ADDITIONAL NAME(S)/INITIAL(S)

POSTAL CODE

33178

STATE

FL

COUNTRY

SUFFIX

COUNTRY

USA

)F 2

## **UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

2c. MAILING ADDRESS

3c. MAILING ADDRESS

3a. ORGANIZATION'S NAME

3b. INDIVIDUAL'S SURNAME

9800 NW 41ST STREET

WORLD FUEL SERVICES, INC.

A. NAME & PHONE OF CONTACT AT FILER (optional) (800) 826-5256 UCC DIVISION		EDWARD H. MOODY  COOK COUNTY RECORDER OF DEEDS				
B. E-MAIL CONTACT AT FILER (optional)						
UCC@NCSCREDIT.COM COOK, IL		DATE: 06/18/	'2020 01:19 P	M PG: 1 (		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
NCS UCC SERVICES GROUP PO BOX 24101 CLEVELAND, OH 44124 USA (800) 826-5250		- 14				
	THE A	BOVE SPACE IS FOR FILIN	IG OFFICE USE (	DNLY		
1. DEBTOR'S NAME: Provide on', one Debtor name (1a or 1b) (use exact, name will not fit in line 1b, leave all of iten. b) ink, check here and prov  1a. ORGANIZATION'S NAME  JGJ ENTERPRISES, INC.						
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAM	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX			
1c. MAILING ADDRESS 5150 WEST CHICAGO AVE.	CHICAGO	STATE POSTA	651	COUNTRY		
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use excellaname will not fit in line 2b, leave all of item 2 blank, check here and provided in the control of th						
2a. ORGANIZATION'S NAME	70					
OR 25 INDIVIDUAL'S SURNAME	FIRST F. S ON AL NAME	ADDITIONAL NAM	AE(S)/INITIAL(S)	SUFFIX		

4. COLLATERAL: This financing statement covers the following collateral: SECURITY INTEREST IN ALL OPERATIONAL IMPROVEMENTS, MADE AT PREMISES IN CONNECTION WITH IMAGE REQUIREMENTS AS STATED IN THE WHOLESALE SUPPLY AGREEMENT DATED FERVARY 13, 2020 ("WSA") IN THE AMOUNT OF \$85,000.00 AS EVIDENCED BY THE PROMISSORY NOTE INCORPORATED INTO THE WSA. THIS INCLUDES ALL INVENTORIES, ALL FIXTURES AND ALL PERSONAL PROPERTY BETWEEN WORLD FUEL SERVICES INC. AND JGJ ENTERPRISES, INC.

MIAMI

CITY

FIRST PERSONAL NAME

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY). Provide only on a Secured Party name (3a or 3b)

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 Deceden	t's Personal Representative
6a. Check only if applicable and check only one box:	6b. Check only if applicable and c	heck <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/Buy	er Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	. 7	
UCC# U261898 REF# 115114		,

2017015035 Page: 2 of 2

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## **UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS						
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if because Individual Debtor name did not fit, check here [ ]						
9a. ORGANIZATION'S NAME						
JGJ ENTERPRISES, INC.						
oco Enterneda, inc.	<del></del> ,					
On.						
9b. INDIVIDUAL'S SURNAME						
FIRST PERSONAL '. 1ME						
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
ADDITIONAL NAME(S)/INI' IALI S)	SUFFI	x				
70_			THE ABOVE	SPACE	S FOR FILING OFFICE	USE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or			line 1b or 2b of the I	inancing S	Statement (Form UCC1) (us	e exact, full name;
do not omit, modify, or abbreviate any part of the Cotor's name) and enter the m	nailing address in line	10c		<b></b>		· · · · · · · · · · · · · · · · · · ·
10a. ORGANIZATION'S NAME						
OR 10b, INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	Z					SUFFIX
10c. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNO	OR SECUREΓ P	ARTY'S	NAME: Provide	nly one na	ame (11a or 11b)	
11a, ORGANIZATION'S NAME	<u> </u>	<b>万</b> 。	· · · · · · · · · · · · · · · · · · ·			
OR INDIVIDUAL IS CURRENT.						
11b, INDIVIDUAL'S SURNAME	FIRST PERSONAL I	NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Market Appears	OLTY			CTATE	Inoctil cone	COUNTRY
11c. MAILING ADDRESS	CITY		0	STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):				<del></del>	.l	
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					9	
13. / This FINANCING STATEMENT is to be filed (for record) (or recorded) in the	14. This FINANCING	G STATEN	AENT:			
REAL ESTATE RECORDS (if applicable)	covers timb	er to be c	ut 🔲 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 re	eal estate:				
(if Debtor does not have a record interest): Chicago & Laramie Property, LLC	Parcel # 16-04-423-040-0000					
14013 Sheri Ln, Orlando Park, IL 60462	Commonly known as: 5150 aka 5152 West Chicago Ave, Chicago, IL 60651					
		-		- 00	t- 07 D-th	
					to 27, Both enson and Sc	hmidt!s
					ubdivision o	
					4 or the Sou	
					9 North, Ran	
	East of the Third Principal Meridian, in Cook					
	County, I	llinc	ois.			
17. MISCELLANEOUS:	<u> </u>					