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KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 12/29/2020 10:01 AM PG: 1 OF 2

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141
B. E-MAIL CONTACT AT FILER (optional)
uccfilingreturn@wolterskluwer.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 506503 - SIERRA VIEW
Lien Solutions 77851314
P.O. Box 29071
Glendale, CA 91209-9071
ILIL
FIXTURE

File with: Cook, IL

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here [] and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME
OR 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
TERROBA MARTIN A
1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
4454 NORTH MENARD AVENUE CHICAGO IL 60630-3330 USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here [] and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME
OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
JOLIPA SHERYL
2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
4454 NORTH MENARD AVENUE CHICAGO IL 60630-3330 USA

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

3a. ORGANIZATION'S NAME
INTERLOCK INDUSTRIES (MIDWEST) INC.
OR 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
104 - 2355 Fairview Avenue Roseville MN 55113 USA

4. COLLATERAL: This financing statement covers the following collateral:

THIS FIXTURE FILING COVERS A ROOFING SYSTEM AND IS TO BE RECORDED IN THE REAL ESTATE RECORDS OF COOK COUNTY.

COUNTY/RECORDING DISTRICT: COOK

SITUS/ADDRESS: 4454 N MENARD AVE, CHICAGO, IL

PARCEL #: 13-17-228-017-0000

CONVEYS: QUITCLAIM DEED

DOCUMENT NO:1623513062

DATE RECORDED: 08/22/2016

LEGAL: LOT 2, BLOCK 8 IN W.G. MCINTOSH WILSON AVENUE ADDITION TO CHICAGO, A SUBDIVISION OF THE SOUTH WEST 1/4 OF THE NORTH EAST 1/4 OF THE SECTION 17, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

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:

[] Public-Finance Transaction [] Manufactured-Home Transaction [] A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

[] Agricultural Lien [] Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): [] Lessee/Lessor [] Consignee/Consignor [] Seller/Buyer [] Bailee/Bailor [] Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:

77851314

LOAN NUMBER: ILIL20024-RC

\$14,500 (CALL 877-765-9378)

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

OR 9b. INDIVIDUAL'S SURNAME

TERROBA

FIRST PERSONAL NAME

MARTIN

ADDITIONAL NAME(S)/INITIAL(S)

A

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) 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 Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR 10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME **or** ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR 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):

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 (if Debtor does not have a record interest):

16. Description of real estate:

Parcel ID:
13-17-228-017-0000

COUNTY/RECORDING DISTRICT: COOK
SITUS: 4454 N MENARD AVE, CHICAGO, IL
CONVEYS: QUITCLAIM DEED
DOCUMENT NO: 1623513062
DATE RECORDED: 08/22/2016

17. MISCELLANEOUS: 77851314-IL-31 506503 - SIERRA VIEW HOLDINGS INTERLOCK INDUSTRIES (MIDWEST) File with: Cook, IL LOAN NUMBER: ILIL20024-RC \$14,500 (CALL