

Doc#. 2102906349 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

## LICC FINANCING STATEMENT

| FOLLOW INSTRUCTIONS  | Date: 01/29/  | /2021 04:14 PN       | /I Pg: 1                     | of 2                             |                   |
|--|---|----------------------|------------------------------|----------------------------------|-------------------|
| A NAME & PHONE OF CONTACT AT FILER (optional)  |   |                      |                              |                                  |                   |
|  |   |                      |                              |                                  |                   |
| B E-MAIL CONTACT AT FILER (optional)   | ı   |                      |                              |                                  |                   |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address)  |   |                      |                              |                                  |                   |
|  | <b>¬</b>  |                      |                              |                                  |                   |
| 1  | 1   |                      |                              |                                  |                   |
|  |   |                      |                              |                                  |                   |
|  |   |                      |                              |                                  |                   |
|  | <b>⋰</b> │  | IF ABOVE SPAC        | CE IS FO                     | R FILING OFFICE USE              | ONLY              |
| 1 DEBTOR'S NAME Provide r. oy one Debtor name (1a or 1b) (use exact,   |   |                      |                              |                                  |                   |
| name will not fit in line 1b, leave (4 or it m 1 blank, check here and prov  | ide the Individual Debtor information in  | n item 10 of the Fin | ancing Sta                   | tement Addendum (Form U          | CC1Ad)            |
| 19 ORGANIZATION'S NAME   |   |                      |                              |                                  |                   |
| OR 15 INDIVIDUAL'S SURNAME   | FIRST PERSONAL NAME   |                      | ADDITIO                      | VAL NAME(S)/INITIAL(S)           | SUFFIX            |
| Tollinche  | Charles   |                      | R                            |                                  |                   |
| 10 MAILING ADDRESS   | CITY  |                      | STATE                        | POSTAL CODE                      | COUNTRY           |
| 1242 N Lake Shore Drive, Unit#15   | Chicago   |                      | IL                           | 60610                            | USA               |
| 2 DEBTOR'S NAME Provide only one Debtor name (2a or 2b) (Live exact, name will not fit in time 2b, leave all of item 2 blank, check here [ ] and provided in the control of | full name, do not omit, modify, or abbrite the Individual Debtor information in |                      |                              |                                  |                   |
| 28. ORGANIZATION'S NAME  | 26 High Mathebal Debtor Wildington  | TREST TO GI DIE I E  |                              | nonent rossinoni (i orii c       |                   |
| · ·  | 4   |                      |                              |                                  |                   |
| OR 25 INDIVIDUAL'S SURNAME   | FIRST -ER: ONAL NAME  |                      | ADDITIONAL NAME(SYINITIAL(S) |                                  | SUFFIX            |
| Tollinche  | Denise  |                      | Lauren                       |                                  |                   |
| 2c. MAILING ADDRESS 1242 N Lake Shore Drive, Unit#15   | Chicago   |                      | STATE                        | 60610                            | USA               |
| 3 SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S  |   | Samuel Barby some    |                              |                                  | USA               |
| 38 ORGANIZATION'S NAME   | CORED PARTTY Provide Grav Birys   | Peccied Party Haire  | 1(38 01 30                   |                                  |                   |
| Citibank, N.A.   |   | $\triangle$          |                              |                                  |                   |
| 36 INDIVIDUAL'S SURNAME  | FIRST PERSONAL NAME   |                      | ADDITIO                      | NAL NAME(S)/INITIAL(S)           | SUFFIX            |
| 3c. MAILING ADDRESS  | CITY  | <u> </u>             | STATE                        | POSTAL CODE                      | COUNTRY           |
| 1000 Technology Drive  | O'Fallon  | 1                    | MO                           | 63368-2240                       | USA               |
| 4. COLLATERAL. This financing statement covers the following collateral  | <del> </del>  |                      | 9                            |                                  |                   |
| "The Cooperative Interest(s) associated with the Co  |   |                      |                              |                                  |                   |
| 1242 N Lake Shore Drive, Chicago, Il 60610. The De<br>Corporation (Coop Corp. Name: 1242 LAKE SHOP   |   |                      |                              |                                  |                   |
| the proprietary lease(s) or occupancy agreement(s)   |   | •                    |                              |                                  | · · ·             |
| proprietary lease or occupancy agreement amendme   |   |                      |                              |                                  |                   |
| right, title and interest in and to all dwellings, build   | <b>-</b>  |                      |                              |                                  |                   |
| fixtures and appurtenances, erected now or in the fu   |   |                      |                              |                                  |                   |
| and by the related street address, inclusive of all rep  |   |                      |                              |                                  |                   |
| involuntary, of any of the foregoing into cash or lique condemnation awards and any unearned premiums  |   |                      |                              |                                  |                   |
| or hereafter obtained by the Debtor(s)."   | accined, accining or to a   | icci ue unuci        | any a                        | no an mourance p                 | Olicies HOW       |
| or ner carrot comments by the beats (c).   |   |                      |                              |                                  |                   |
|  |   |                      |                              |                                  |                   |
| 5. Check only if applicable and check only one box. Collateral is held in a Tr   | ust (see UCC1Ad, item 17 and Instruc  | tions) being         | administe                    | ed by a Decedent's Person        | al Representative |
| 6a Check only if applicable and check only one box   |   |                      |                              | applicable and check <u>only</u> |                   |
| Public-Finance Transaction Manufactured-Home Transaction   | A Debtor is a Transmitting  | Ublity               | Agricult                     | ural Lien Non-UCC                | Filing            |
| 7. ALTERNATIVE DESIGNATION (if applicable) Lessee/Lessor   | Consignee/Consignor   | Seller/Buyer         | Baı                          | lee/Bastor Lice                  | nsee/Licensor     |
| 8. OPTIONAL FILER REFERENCE DATA Mortgage Rep: Denise Heldman NMLS# 727020 L   | anday Namas Citibants N   | A NIMS#              | 41201                        | 5   00p # 0047790                | 002024            |

2102906349 Page: 2 of 2

## **UNOFFICIAL COPY**

Loan # : 004778002024

## **Exhibit A**

## LEGAL DESCRIPTION

The following described property:

Apt./Unit No. 15

Lots one (1) and two (2) in Farlin's Subdivision of South twenty-five (25) feet of lot four (4) and the North th'rty-six (36) feet of lot five (5) in Block seven (7) in H. O. Stone's Subdivision of Astor's Addition to Chicago, (lying West of Lake Shore Drive) in Cook County, Illinois and the building located thereon.

Assessor's Parcel No: 17-03-11 (-005