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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)	
B. E-MAIL CONTACT AT FILER (optional)	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Susan M. Campbell	
Director	
Cook County Department of Planning and Development	
69 W. Washington, Suite 2900	
Chicago, IL 5000	

Doc# 2111219048 Fee \$88.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 04/22/2021 03:58 PM PG: 1 OF 2

L	Chicago, IL 50002	THE ABOVE SP	ACE IS FO	R FILING OFFICE USE	ONLY	
	EBTOR'S NAME: Provide (nlv_nr Debtor name (1a or 1b) (use exact, full rame will not fit in line 1b, leave all of tem blank, check here and provide t	name; do not omit, modify, or abbreviate any part o he Individual Debtor information in item 10 of the F				
ĺ	1a. ORGANIZATION'S NAME MUSTACCHI MANOR			-		
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
1¢.	MAILING ADDRESS 2040 BROWN AVENUE	EVANSTON	STATE	POSTAL CODE 60201	USA	
	DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use ex.ct, till rame will not fit in line 2b, leave all of item 2 blank, check here and provide to	name; do not omit, modify, or abbreviate any part o e Individual Debtor information in item 10 of the R				
	2a. ORGANIZATION'S NAME	7				
OR	2b. INDIVIDUAL'S SURNAME	FIRS'I PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
2c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
	3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only only secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME COUNTY OF COOK, A BODY POLITIC AND CORPORATE OF THE STATE OF ILLINOIS					
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
3c.	MAILING ADDRESS 69 W. WASHINGTON, SUITE 2900	CHICAGO	STATE	POSTAL CODE 60602	USA	

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

SEE EXHIBIT A

AFTER RECORDING, RETURN TO:

TITLE SERVICES, INC. 610 E. ROOSEVELT ROAD SUITE 201 WHEATON, IL 60187

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
Of Control plant in Experience and the Control plant in the Control plan	6b. Check only if applicable and check only 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: File in the Office of the Cook County Recorder of Deeds	

International Association of Commercial Administrators (IACA)

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LEGAL DESCRIPTION

LOT 5 THROUGH 9, BOTH INCLUSIVE, IN S/W CORPORATE PARK, BEING A SUBDIVISION OF PART OF THE SOUTHEAST QUARTER OF SECTION 21, TOWNSHIP 35 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN ACCORDING TO THE PLAT THEREOF RECORDED SEPTEMBER 12, 1988 AS DOCUMENT 88415218, ALL IN COOK COUNTY, ILLINOIS.

PIN:

LOT 5:31-21-402-005-0000 LOT 6: 31-21-402-006-0000

LOT 7: 31-21-402-007-0000 LOT 8: 31-21-402-008-0000 LOT 9: 31-21-402-009-0000

COMMON ADDRESS: 5050 Southwick Avenue, Matteson, IL 60443