UNOFFICIAL COPY



UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS				029 Fee \$93.00 RF FEE: \$1.00	l		
A. NAME & PHONE OF CONTACT AT FILER (optional)		KAREN A. YA					
CSC 1-800-858-5294		COOK COUNTY	CLERK				
B. E-MAIL CONTACT AT FILER (optional) SPRFilling@cscglobal.com				02:57 PM PG: 1 0	Fo		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		1		•			
2123 81861	\neg						
csc	•						
801 Adlai Stevenson Drive							
Springfield, IL 62703 File	d In: Illinois						
	(Cook)						
		THE ABOVE SPACE	CE IS FO	R FILING OFFICE USE	ONLY		
DEBTOR'S NAME: Provide only and Debtor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of itom 1 blank, check here and provide)		modify, or abbreviate any part of to or information in item 10 of the Fin					
1a. ORGANIZATION'S NAME				ν.			
OR 1b. INDIVIDUAL'S SURNAME	Teiner penconi	UNINE	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
Ilesanmi	Akindayo	FIRST PERSONAL NAME Akindayo		NAL NAME(S)/INTIAL(S)	SOFFIX		
1c. MAILING ADDRESS 1916 Hartrey Ave	City Evanston		STATE IL	POSTAL CODE 60201	COUNTRY		
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use e. act it name will not fit in line 2b, leave all of item 2 blank, check here and provide		modify, or abbreviate any part of t or information in item 10 of the Fin					
2a. ORGANIZATION'S NAME	To Tarrada Bost	or morniagon minor, to or bio the	ditoring ou	Sterillon, Flooding II, Cilii O	501714)		
	'						
OR 2b. INDIVIDUAL'S SURNAME	FIRST TERSONAL NAME			NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX			
2c. MAILING ADDRESS	CITY	Dx.	STATE	POSTAL CODE	COUNTRY		
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECT	URED PARTY): Pro	ovide only <u>une</u> Secured Party name	(3a or 3b)			
3a. ORGANIZATION'S NAME All In Credit Union		()					
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
3c. MAILING ADDRESS P.O. Drawer 8	CITY		STATE	POSTAL CODE	COUNTRY		
1 .O. Dianei O	Daleville		AL.	36322	USA		
4.COLLATERAL: This financing statement covers the following collateral: 4.620000 kW photovoltaic solar energy system, con PRODUCTS, PROCEEDS AND ATTACHMENTS.	nsisting of: A	xitec modules, SolarE	dge in	voitee AND ALL C	THER		
				-0	P'		

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 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/Buye	er Bailee/Bailor Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA:	2123 81861	

2116829029 Page: 2 of 2

UNOFFICIAL COPY

UCC FINANCING STATEMENT ADDENDUM

FOLLOWINSTRUCTIONS					
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if because Individual Debtor name did not fit, check here	line 1b was left blank				
9a. ORGANIZATION'S NAME					
OR 9b, INDIVIDUAL'S SURNAME					
Ilesanmi					
FIRST PERSONAL NA AL					
Akindayo					
ADDITIONAL NAME(S)ANIT'AL(S)	SUFFIX				
DESTRUCTION OF THE PROPERTY OF				S FOR FILING OFFICE I	
10. DEBTOR'S NAME: Provide (10a or ເປົ້າ) xnly one additional Debtor name or do not omit, modify, or abbreviate any part of the Debtor's name) and enter the m		line 1b or 2b of the F	inancing S	statement (Form UCC1) (use	exact, full name;
10a. ORGANIZATION'S NAME	<u> </u>				
3					
OR 10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S))				SUFFIX
	τ_{-}				
10c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
	OR SECURE D PARTY'S	NAME: Provide of	nly <u>one</u> na	ame (11a or 11b)	
11a, ORGANIZATION'S NAME	() ×				
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
10 10 10 10 10 10 10 10 10 10 10 10 10 1					
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):					
			0.		
				$\bigcup_{x_{-}}$	
				1/sico	
				(C)	
				0	
13. This FINANCING STATEMENT is to be filled [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14, This FINANCING STATE	MENT:			
REAL ESTATE RECORDS (if applicable)	covers timber 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 (if Debtor does not have a record interest):	16. Description of real estate:		DCI III	COURT	
(if Debtor does not have a record interest): Legal Description: LOTS3&4 CIRCUIT COURT County: COOK, IL APN: 10-13-107-013-0000					
	Census Tract / Blo			0-0000	
	Township-Range-S				
	Lot 46				
Subdivision: MCCORMICK PARK					
	Munic/Township: E	:VANSTON			
···					
17. MISCELLANEOUS:					