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A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294 B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)		Doc# 2133519062 Fee \$93.00 RHSP FEE:\$9.00 RPRF FEE: \$1.00 KAREN A. YARBROUGH COOK COUNTY CLERK DATE: 12/01/2021 02:04 PN PG: 1 OF 2									
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						801 Adlai Stevenson Drive Springfield, IL 62703					
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DEBTOR'S NAME: Provide only ale Debtor name (1a or 1b) (use exact, 1	full name: do not omit, modify, or										
	ide the Individual Debtor informa										
1a, ORGANIZATION'S NAME					•						
1b, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	A	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX						
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MAILING ADDRESS 642 24TH AVE	CITY		TATE	POSTAL CODE	COUNTRY						
	BELLWOOD		IL	60104	USA						
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use expertiname will not fit in line 2b, leave all of item 2 blank, check here and provide only one of the provide or the provide of the provide or the provide	്രീ name; do not omit, modify, or de the '.idividual Debtor informa										
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SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SE	ECURED PARTY): Provide only	one Secured Party name (3a or 3b)							
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3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		STA 15	POSTAL CODE	COUNTRY						
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8. OPTIONAL FILER REFERENCE DATA: : 70087312 / 60363110

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UCC FINANCING STATEMENT ADDENDUM

OLLOWINSTRUCTIONS		•			
. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing S because Individual Debtor name did not fit, check here	Statement; if line 1b was left blank	ŀ			
9a. ORGANIZATION'S NAME		<u> </u>		•	
95. INDIVIDUAL'S SURNAME					
COBB					
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ADDITIONAL NAME(S)/init'aL(3)	SUFFIX	ł			
		THE ABOVE	SPACE	S FOR FILING OFFIC	E USE ONLY
DEBTOR'S NAME: Provide (10a or 0.1) July one additional Deb					
do not omit, modify, or abbreviate any part of the Linux name) and	I enter the mailing address in line 10c				_ .
10a. ORGANIZATION'S NAME					
R 10b. INDIVIDUAL'S SURNAME					,
INDIVIDUAL'S FIRST PERSONAL NAME	-0				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
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c. MAILING ADDRESS	СІТУ		STATE	POSTAL CODE	COUNTRY
<u> </u>	ASSIGNOR SECURE J PARTY	'S NAME: Provide of	nly <u>one</u> n	ame (11a or 11b)	<u> </u>
11a. ORGANIZATION'S NAME					
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
:. ADDITIONAL SPACE FOR ITEM 4 (Collateral):					
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				(C)	
This FINANCING STATEMENT is to be filed (for record) (or record) PEAL ESTATE RECORDS (if applicable)	orded) in the 14. This FINANCING STATE				
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Name and address of a RECORD OWNER of real estate described in	16. Description of real estate APN:15-10-316-0	cut covers as- e: 25-0000 LOT	69 IN	collateral is filed a	D FOREMA
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i. Name and address of a RECORD OWNER of real estate described in (if Debtor does not have a record interest): EDDIE COBB 42 24TH AVE	16. Description of real estate APN:15-10-316-00 REAL ESTATE CI CLUB SUBDIVISI	cut covers as- e: 25-0000 LOT ORPORATIO	69 IN N SIX	collateral is filed a COMMINGS AN TH ADDITION T	D FOREMA
5. Name and address of a RECORD OWNER of real estate described in (if Debtor does not have a record interest): EDDIE COBB 342 24TH AVE	16. Description of real estate APN:15-10-316-00 REAL ESTATE CI CLUB SUBDIVISI 10,TOWNSHIP	cut covers as- e: 25-0000 LOT ORPORATIO ON IN THE S	69 IN N SIX ¹ W 1/4	collateral is filed a COMMINGS AN TH ADDITION T OF SECTION	D FOREMA O GOLF
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3. This FINANCING STATEMENT is to be filed (for record) (or record REAL ESTATE RECORDS (if applicable) 5. Name and address of a RECORD OWNER of real estate described in (if Debtor does not have a record interest): EDDIE COBB 642 24TH AVE BELLWOOD, IL 60104	16. Description of real estate APN:15-10-316-0: REAL ESTATE CONTROL CONTROL 10,TOWNSHIP 39 NORTH,RANG MERIDIAN,ACCO ON MAY 17,1925	cut Covers as- e: 25-0000 LOT ORPORATIO ON IN THE S EE 12 EAST C ORDING TO T IN BOOK 19	69 IN N SIXT W 1/4 DF THE HE PL 6 OF F	COMMINGS AND THE ADDITION TO SECTION THE THIRD PRINCE THEREOF FOLLATS PAGE 41	D FOREMA O GOLF IPAL RECORDED AS
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