*2134408010*****

CC FINANCING STATEMENT DLLOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional) lame: Wolters Kluwer Lien Solutions Phone: 800-331-326		DO	.c# 51244030]6) Fee \$93,00		
		RH!	SP FFF:\$9 AA DOOF	FFF: #1 00		
		RHSP FEE:\$9.00 RPRF FEE: \$1.00 Karen a. Yarbrough				
	82 Fax: 818-662-4141					
. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com		COOK COUNTY CLERK DATE: 12/10/2021 09:51 AM PG: 1 O				
SEND ACKNOW! EDGMENT TO: (Name and Address)		2111	2. 12/10/2021 09:	SI AM PG: 1 OF		
4947	1 - Launch Servicing,	٠.٠	· <u>-</u>			
Lien Solutions	83563914					
P.O. Box 29071 Glendale, CA 91209-9071	_IL					
•						
	IXTURE					
File with: Cook, IL		HE ABOVE SPACE IS F	OR FILING OFFICE U	SE ONLY		
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use						
name will not fit in line 1b, leave all of ite (1 t ank, check here and and 1a, ORGANIZATION'S NAME	d provide the Individual Debtor information	n item 10 of the Financing Sta	atement Addendum (Form	UCC1Ad)		
IB. URGANIZATIONS NAME						
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
SANTIAGO	PHILLIP					
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
912 Harrison Street	Glenview		60025	USA		
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME	d provide the Individual Debtor information		NAL NAME(S)/INITIAL(S)	SUFFIX		
SANTIAGO	VANESSA	Abbino	HAE GAME(O)/HTHAE(O)	301117		
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
912 Harrison Street	Glenview	IL IL	60025	USA		
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN [3a. ORGANIZATION'S NAME	OR SECURED PARTY): Provide only une	Secured Party name (3a or 3	b)			
EnerBankUSA		C/				
ЗЬ. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(SYINITIAL(S)	SUFFIX		
-		4				
	CITY	SAE	POSTAL CODE	COUNTRY		
. MAILING ADDRESS	Salt Lake City	UT		300		

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 De	ecedent's Personal Representative
6a. Check only if applicable and chec	k <u>only</u> one box:		6b. Check only if applicab	ile and check <u>only</u> one box:
Public-Finance Transaction	Manufactured-Home Transactio	n A Debtor is a Transmitting Utility	Agricultural Lien	Non-UCC Filling
7. ALTERNATIVE DESIGNATION (if	applicable): Lessee/Lessor	Consignee/Consignor Seller/Bu	yer Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE D 83563914	ATA: LoanID 193533		LenderCod	le ENRBK2

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS					
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line because Individual Debtor name did not fit, check here	ne 1b was left blank]			
9a. ORGANIZATION'S NAME		-			
		,			
OR 9b. INDIVIDUAL'S SURNAME					
SANTIAGO					
FIRST PERSONAL NAME		1			
PHILLIP					
ADDITIONAL NAME(SYINITIAL(S'	SUFFIX	1			
		THE ABOVE	SPACE	IS FOR FILING OFFI	CE LISE ONLY
10. DEBTOR'S NAME: Provide (10a r. 10h) only one additional Debtor name or	Dobtor name that did not fit in				· · · · · · · · · · · · · · · · · · ·
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the ma		illine 10 01 20 01 (file Fi	nancing 3	iatement (Form OCC I) (us	e exact, full hame,
10a. ORGANIZATION'S NAME	5				
4					
OR 10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)					SUFFIX
	4				
10c, MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO	OR SECURED FARTY'S	NAME: Provide only	one nam	e (11a or 11b)	
11a. ORGANIZATION'S NAME	90.	-			
20					
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)INITIAL(S)	SUFFIX
11c, MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		7			
			0,		
				Vic.	
				CO	
				C	
13. X This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14. This FINANCING STAT	EMENT.			
REAL ESTATE RECORDS (if applicable)	covers timber to be	_	evtracted	collateral X is filed as	a fixture filing
15. Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real estat		cxbacteo	Constates NZ is used as	B fixture filling
(if Debtor does not have a record interest):	Parcel ID:				
	09-11-205-014-0000				
	03-11-203-01-	+-0000			
		0.4/0.47			
Recorded: 03/24/2017 Instrument #: 1708346068					
Legal Description as per last deed of record					
LOT 12 IN BLOCK 2 IN MORTON M.					SCH'S
[See Exhibit for Real Estate]					
TO THE OFFICE AND CONTROL OF THE OWNER OWNE			LeanID 4	33533 LanderCode ENIDEUS	<u> </u>
17. MISCELLANEOUS: 83563914-IL-31 49471 - Launch Servicing, LL EnerB	ankUSA	Fite with: Cook, IL	Coanio 19	33533 LenderCode ENRBK2	

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Debtor: SANTIAGO, PHILLIP

Exhibit for Real Estate

16. Description of real estate:

Continued

SUBDIVISION OF PART OF THE NORTHEAST FRACTIONAL 1/4 OF SECTION 1 1, TOWNSHIP 41 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN ACCORDING TO PLAT THEREOF REGISTERED IN THE OFFICE OF THE REGISTRAR OF TITLES ON AUGUST 8, 1956 AS DOCUMENT LR County Clarks Office 1688041 IN COOK COUNTY, ILLINOIS.

APN: 09-11-205-014-0000