UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-3.	31-3282 Fax: 818-662-4141
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com	11.00 4.11
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	506503 - SIERRA VIEW
Lien Solutions P.O. Box 29071	85618381
Glendale, CA 91209-9071	ILIL
	FIXTURE
ile with: Cook, IL	

*22007190418	

Doc# 2208719041 Fee ≸88.00

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

KAREN A. YARBROUGH COOK COUNTY CLERK

DATE: 03/28/2022 03:22 PM PG: 1 OF 2

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use a name will not fit in line 1b, leave all u iter. 1 blank, check here and				
1a. ORGANIZATION'S NAME			·	<u> </u>
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(SYINITIAL(S)		SUFFIX
HARRIS	MERCEDES			
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
8132 SOUTH SOUTH SHORE DRIVE, FL 1	CHICAGO	IL.	60617	USA
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use en name will not fit in line 2b, leave all of item 2 blank, check here and		* *		
28. ORGANIZATION'S NAME	4		-	
26. INDIVIDUAL'S SURNAME	FIRST PERSC NAL NAME	ADDITIONAL NAME(SYINITIAL(S)		SUFFIX
MILEY	IAN	c		
. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
132 SOUTH SOUTH SHORE DRIVE, FL 1	CHICAGO	IL.	60617	USA
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNO	OR SECURED PARTY): Provide only one Secured	Party name (3a or 3	b)	
34. ORGANIZATION'S NAME INTERLOCK INDUSTRIES (MIDWEST) INC.	3).		
36. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
C. MAILING ADDRESS	спу	STATE	POSTAL CODE	COUNTRY
104 - 2355 Fairview Avenue	Roseville	MN	55113	USA
COLLATERAL: This financing statement covers the following collateral		<u>\</u>		•

THIS FIXTURE FILING COVERS A ROOFING SYSTEM AND IS TO BE RECORDED IN THE REAL ESTATE RECOFDS (F COOK COUNTY.

COUNTY/RECORDING DISTRICT: COOK

SITUS/ADDRESS: 8132 S SOUTH SHORE DR, CHICAGO, IL-

PARCEL #: 21-31-223-032-0000 CONVEYS: WARRANTY DEED DOCUMENT NO: 2115901373 DATE RECORDED: 06/08/2021

LEGAL: LOT 27 IN BLOCK 2 IN WALKERS SUBDIVISION OF LOTS 1 TO 24, BOTH INCLUSIVE IN BLOCK 1 AND LOTS 1 TO 24, BOTH INCLUSIVE AND LOTS 31 TO 48, BOTH INCLUSIVE OF BLOCK 2, ALL IN MEEKERS ADDITION TO HYDE PARK, BEING A SUBDIVISION OF THE SOUTHEAST 1/4 OF THE NORTHEAST 1/4 OF SECTION 31, TOWNSHIP 38 NORTH, RANGE 15, EAST OF THE THIRD PRINCIPAL MERIDIAN, (EXCEPT THE WEST 25 FEET OF SAID SOUTHEAST 1/4 OF THE NORTHEAST 1/4 OF SECTION 31), IN COOK COUNTY, ILLINOIS.

5. Check only If applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	heing administered by a Decedent's Personal Representative
	6b. Check only if applicable and check only one box:
Public-Finance Transaction	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buye	r Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: 85618381 LOAN NUMBER: ILIL21023-RC	\$37,445.00 (CALL 877-765-9378)

2208719041 Page: 2 of 2

UNOFFICIAL COPY

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS					
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if lin because Individual Debtor name did not fit, check here	e 1b was left blank				
90. ORGANIZATION'S NAME		1			•
		· ·			
OR 9b. INDIVIDUAL'S SURNAME	-	_			
HARRIS		4			
FIRST PERSONAL NAME MERCEDES					
ADDITIONAL NAME(SVI , ITAL (S)	SUFFIX				
E		THE ABOVE	SPACE	IS FOR FILING OFF	ICE USE ONLY
10. DEBTOR'S NAME: Provide (10. or 10.) only one additional Debtor name or		in line 1b or 2b of the Fi	inancing Si	tatement (Form UCC1) (us	se exact, full name;
do not omit, modify, or abbreviate any p. n or th ≥ Debtor's name) and enter the ma 10a. ORGANIZATION'S NAME	illing address in line 10c				
<i>y</i>				-	
OR 10b. INDIVIDUAL'S SURNAME					,
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		····			SUFFIX
10c, MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
Total Marchita Activities					
	OR SECU (ED PARTY'S	S NAME: Provide only	one nam	e (11a or 11b)	
11a. ORGANIZATION'S NAME	45				
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	/	ADDITIO	NAL NAME(SYNITIAL(S)	SUFFIX
				<u> </u>	
11c. MAILING ADDRESS	СПҮ	し	STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		(8,		<u> </u>	
12. ADDITIONAL OF NOL FOR THEM COMMUNICALLY.			-		
			S'		
				150.	
		•			
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14. This FINANCING ST	ATEMENT:		 @_	
REAL ESTATE RECORDS (if applicable)	covers timber to I		extracted	collateral X 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 es Parcel ID:	tate:			
(, 2002, 200, 200, 200, 200, 200, 200, 2	21-31-223-03	32-0000			•
	21 01 220 00)L 0000			
·	COUNTY: C	OOK			
	SITUS: 8132	S SOUTH	SHOF	RE DR, CHICA	AGO, IL
•	CONVEYS:				
	DOCUMENT				
	DATE RECO	יאטבט: 106/0	0/202		
AND AND AND ARRESTED IN 24 FOREST CIFEDDA VIEW HOLDINGS INTEL	RLOCK INDUSTRIES (MIDWES	ST) File with: Cook, IL.	LOAN N	JMBER: NJL21023-RC \$37,	445.00 (CALL
17. MISCELLANEOUS: 85618381-IL-31 506503 - SIERRA VIEW HOLDINGS INTER	TOOL HEROTE HEROTEL		-		