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Doc# 2221008032 Fee \$93.00

UCC FINANCING STATEMENT		RHSP FEE:\$9.00 RPRF FE	E: \$1 00
FOLLOWINSTRUCTIONS		KAREN A. YARBROUGH	
A. NAME & PHONE OF CONTACT AT FILER (optional)		COOK COUNTY CLERK	
CSC 1-800-858-5294	· · · · · · · · · · · · · · · · · · ·	DATE: 07/29/2022 10:31	OM DC
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com			FM PG: 1 OF 3
C. SEND ACKNOWLEDGMENT TO: (Name and Address)			
2362 68322	コー		
CSC 801 Adlai Stevenson Drive	j		
Springfield II 62703	d In: Illinois		
	(Cook)		
	THE ABOVE SPA	CE IS FOR FILING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide only ane Debtor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of name brank, check here and provide	name; do not omit, modify, or abbreviate any part of the Individual Debtor information in item 10 of the F		
1a. ORGANIZATION'S NAME			
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
DOMBROWSKI	LAWRENCE	В.	001111
1c. MAILING ADDRESS 7315 N OVERHILL AVE	CITY	STATE POSTAL CODE	COUNTRY
	CHICAGO	IL 60631	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use extention name will not fit in line 2b, leave all of item 2 blank, check here and provide	name; do not omit, modify, or abbreviate any part o		
2a, ORGANIZATION'S NAME	1		
	' ()		
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
	100		
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECTION OF ASSIGNED ASSIGNE		ne (3a or 3b)	<del></del>
3a. ORGANIZATION'S NAME Service Experts Heating & Air (	Conditioning LLC		
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 236 E. Egidi Dr, Ste B	CITY	ST/ TE POSTAL CODE	COUNTRY
	Wheeling	IL 60090	USA
4. COLLATERAL: This financing statement covers the following collateral: The following described property as set forth in that co	contain HVAC BENITAL ACREEN	ICNT day d (17/27/2002)	by and
between Service Experts Heating & Air Conditioning			
#SL280UH110V60C(Serial # 5921M22911) and a LE			
5822D00973), whether now owned or hereafter acqu			
accessories, parts and tools belonging thereto or for			
of any of the foregoing (including, but not limited to, a			
of Debtor against third parties for loss of, damage to	•	·	
under, or unearned premiums with respect to, policie cash, interest, principal, royalties, license fees, rents,			
payment of money, chattel paper, security agreemen			
received, receivable or otherwise distributed in respe			
address:	-		INTA

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 Seller/Buyer Bailee/Bailor Licensee/Licensor 7. ALTERNATIVE DESIGNATION (if applicable); Consignee/Consignor 8. OPTIONAL FILER REFERENCE DATA: 2362 68322

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### UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS					
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement because Individual Debtor name did not fit, check here	; if line 1b was left blank				
9a. ORGANIZATION'S NAME		4			
	•				
22					
OR 9b. INDIVIDUAL'S SURNAME					
DOMBROWSKI					
FIRST PERSONAL NAME LAWRENCE					
ADDITIONAL NAME(5), NIT (L(S)	lousew	4			
B.	SUFFIX	1			
	5.1	_		IS FOR FILING OFFICE	
10. DEBTOR'S NAME: Provide (10a or (05) only one additional Debtor name do not omit, modify, or abbreviate any part of ".e 25 btor's name) and enter the		t in line 1b or 2b of the	Financing :	Statement (Form UCC1) (us	e exact, full name;
10a. ORGANIZATION'S NAME					
					•
OR 10b. INDIVIDUAL'S SURNAME	<del></del>				
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					T
INDIVIDUAL S ADDITIONAL NAME(S)/INVITIAL(S)	4				SUFFIX
10c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
			SIAIL	- OOTAL OODL	COOMIN
11. ADDITIONAL SECURED PARTY'S NAME or ASSIG	NOR SECURED PÄRT	V'S NAME: Dravido	aniana a		
11a. ORGANIZATION'S NAME	NOR GEOORED ART	1 3 NAME. Floride	Only One n	anie (Tia or Tib)	· -
an l		7_			
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	10.	STATE	POSTAL CODE	COUNTRY
40 ADDITIONAL OBAGE FOR ITEM 4 (O. II.)					
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 7315 N OVERHILL AVE		•	0.1		
CHICAGO, IL 60631			O.		
				$\bigcirc_{\sim}$	
THE FILING IS MADE FOR NOTICE DURDOCEO	ONLY THE BERT	00.040.00.0	N. 4 (8 157 5		
THIS FILING IS MADE FOR NOTICE PURPOSES COLLATERAL. THE DEBTOR IS LEASING THE C		OR HAS NO	)WNE	RSHIP RICHTS IN	NTHE
COLLATERAL. THE DEBTOR IS LEASING THE C	OLLATERAL.				
. [7]					<del></del>
<ol> <li>This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)</li> </ol>	1 —				
15. Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real est		-extracted	collateral 🔽 is filed as	a fixture filing
(if Debtor does not have a record interest); LAWRENCE B. DOMBROWSKI	ALL THAT LOT,	PIECE OR PA	RCEL	OF LAND, SITUA	TE IN THE
7315 N OVERHILL AVE				OOK, STATE OF	
CHICAGO, IL 60631				as Lot 7 in Loeb-	
	ſ	•		, and Lot 7 to 10,	•
				nd 7(except the E	
	I			street) in the Res in the Paine Esta	
				arter of Section 2	
				Principal Meridian	
		_,			
47 HICOSH ANEOUS	1			• "	
17. MISCELLANEOUS:					

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#### **UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS  9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement;	it for the second of the second			
because Individual Debtor name did not fit, check here	; ir line 10 was leit blank			
9a. ORGANIZATION'S NAME	-			
OR 9b. INDIVIDUAL'S SURNAME				
DOMBROWSKI				
FIRST PERSONAL NA' LAWRENCE				
ADDITIONAL NAME(S)//.vit*/.c.(S)	SUFFIX			
В.	]	THE ABOVE	SPACE IS FOR FILING OFFICE	USE ONLY
10. DEBTOR'S NAME: Provide (10a or (53) nly one additional Debtor name	or Debtor name that did not fit in I			
do not omit, modify, or abbreviate any pan of the Debtor's name) and enter the 10a. ORGANIZATION'S NAME	mailing address in line 10c			
IU. ORGANIZATIONS NAME				
OR 10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME	<del></del>			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	7			SUFFIX
	4			56777
10c. MAILING ADDRESS	СІТҮ		STATE POSTAL CODE	COUNTRY
	NOR SECURE D PARTY'S	NAME: Provide of	only <u>one</u> name (11a or 11b)	
11a. ORGANIZATION'S NAME	(/)×,			
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	0.	STATE POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):				1
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):			0.	
			U <sub>S</sub>	
13. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable)				
15. Name and address of a RECORD OWNER of real estate described in item 16	covers timber to be co  16. Description of real estate:	ıt covers as-	extracted collateral  is filed as	a fixture filing
(if Debtor does not have a record interest);	County, Illinois.			
	APN #: 09-25-321-	011-0000		
	ļ			
17. MISCELLANEOUS:				