Doc#. 2221533042 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

Date: 08/03/2022 09:54 AM Pg: 1 of 3

## **UCC FINANCING STATEMENT**

FOLLOWINSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 8	818-662-4141			
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com				
C. SEND ACKNOW EDGMENT TO: (Name and Address)	nch Servicina.			
Lien Solutions 87997 P.O. Box 29071	<u> </u>			
Glendale, CA 91209-9071  L L				
FIXTU	JRE			
Filc with Cook, IL	THE ABOVE SPA	ACE IS F	OR FILING OFFICE US	E ONLY
1. DEBTOR'S NAME: Provide onlyee tor name (1a or 1b) (use exact, full				
name will not fit in line 1b, leave all of item 1 of item 1 of item and provide t	he Individual Debtor information in item 10 of the Fi	nancing St	atement Addendum (Form U	(CC1Ad)
The one was more relined				
OR 1b. INDIVIDUAL'S SURNAME STEVENS	FIRST PERSONAL NAME SCOT	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
906 Community Drive	La Grange Park	IL	60526	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact of name will not fit in line 2b. leave all of item 2 blank, check here and provide the name will not fit in line 2b. leave all of item 2 blank, check here	eme; do not omit, modify, or abbreviate any part o bulr dividual Debtor information in item 10 of the Fi			
2a. ORGANIZATION'S NAME	To avidual Debtor Information in Item 10 of the 11	nancing 50	stement Addendam (i omi c	OCTAU)
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERS JNA , NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
A. MAULINO ADDRESO	OTY	DT. T.	I DONTAL DONE	OOUNTDV
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	RED PARTY): Provide only one Serureo Party na	<b>I</b> пе (3a ог 3	<b>l</b> b)	
3a. ORGANIZATION'S NAME				
EnerBankUSA OR 35. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NIAL NIAMETON/BUTTAL (O)	LOUEEN
30. INDIVIDUALS SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	ату	\$T.\1E	POSTAL CODE	COUNTRY
1245 Brickyard Road, Suite 600	Salt Lake City	UT	84 106	USA
4. COLLATERAL: This financing statement covers the following collateral: PURCHASE MONEY SECURITY INTEREST IN SOLAR PRODUCT FIXTURES: ALL OF THE DEBTOR'S RIGHT, TITLE AND INTEREST IN PHOTOVALTAIC SOLAR ENERGY EQUIPMENT (IF ANY), INCLUDING BUT NOT LIMITED TO ROOFTOP OR GROUND MOUNT SOLAR PANELS, ELECTRICAL INVERTERS, MICROINVERTERS OR POWER OPTIMIZERS, CABLES AND WIRES, SUPPORT BRACKETS, F. ELATED EQUIPMENT, AND ADDITIONS OR REPLACEMENTS OF THE SAME. IN ADDITION, THE SECURITY INTEREST INCLUDES ALL WARRANTIES ISSUED WITH RESPECT TO THE REFERENCED COLLATERAL.				
6a. Check only if applicable and check only one box:    Public-Finance Transaction   Manufactured-Home Transaction	6b. 6b. A Debtor is a Transmitting Utility	Check <u>only</u> Agricul	red by a Decedent's Perso if applicable and check <u>on</u> tural Lien  Non-UCC	<u>ly</u> one box: C Filling
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor Seller/Buyer	Bai	lee/Bailor 🔲 Licer	isee/Licensor

LenderCode ENRBK2

LoanID 276385

8. OPTIONAL FILER REFERENCE DATA:

87997821

## **UNOFFICIAL COPY**

UCC FINANCING STATEMENT ADDENDUM **FOLLOW INSTRUCTIONS** 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME OF 9h INDIVIDUAL'S SURNAME **STEVENS** FIRST PERSONAL NAME SCOT ADDITIONAL NAME(S)/INITIAL(S) SUFFIX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 100' only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Patier's name) and enter the mailing address in line 10c 10a, ORGANIZATION'S NAME OR 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS POSTAL CODE COUNTRY ASSIGNOR SECURED PATATY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME 11a. ORGANIZATION'S NAME OF 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral) 14. This FINANCING STATEMENT 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) covers timber to be cut 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 16. Description of real estate: (if Debtor does not have a record interest) Parcel ID: 15-33-112-023-0000 Recorded: 05/05/2015 Instrument #: 1512545031 Legal Description as per last deed of record

LoanID 276385 LenderCode ENRBK2

LOT ELEVEN (11) IN BLOCK THREE (3) IN

File with: Cook, IL

[ See Exhibit for Real Estate ]

EnerBankUSA

17. MISCELLANEOUS: 87997821-IL-31 49471 - Launch Servicing, LL

## **UNOFFICIAL COPY**

**Debtor: STEVENS, SCOT** 

Exhibit for Real Estate

16. Description of real estate: Continued

LAGRANGE PARK HOMESITES OF THE NORTHWEST QUARTER OF THE NORTHEAST QUARTER AND THAT PART OF THE NORTHEAST QUARTER OF THE NOR 1: WEST QUARTER LYING EAST OF CENTER LINE OFFIFTH AVENUE IN SECTION 33, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD JIA. 123-00L PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS.

APN: 15-33-112-023-0000