UNOFFICIAL COPY \*2226598921\*



Doc# 2226508021 Fee \$93.00

UCC FINANCING STATEMENT		RHSP	FEE:\$9.00 RPRF F	EE: \$1.00	
FOLLOWINSTRUCTIONS	<u> </u>	KARE	N A. YARBROUGH		
A. NAME & PHONE OF CONTACT AT FILER (optional) Central Bank Illinois 815-220-1788		COOK COUNTY CLERK			
B. E-MAIL CONTACT AT FILER (optional)	<del></del>				
becki.hawbaker@central-bank.com		DHIC	. 09/22/2022 12.0	2 PH PG: 10	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
	¬			-	
Central Bank Illinois	. ! ]				
1721 Midtown Rd					
Peru, IL 6135.					
1 DEBTOD'S MAME: Do 14-			R FILING OFFICE USE		
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, name will not fit in line 1b, leave all or wern to lank, check here and provided in the land provided in th	, full name; do not omit, modity, or abbrevia vide the Individual Debtor information in ite				
1a. ORGANIZATION'S NAME					
Everclean CW LLC 5					
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
Ux					
1c. MAILING ADDRESS 818 W Northwest Hwy	A Hington Heights	STATE	POSTAL CODE	COUNTRY	
	Arlington Heights	<u> </u>	60004	USA	
<ol> <li>DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use e. act name will not fit in line 2b, leave all of item 2 blank, check here and pro</li> </ol>	full name; do not omit, modify, or abbrevial ide the 'hidividual Debtor information in ite				
2a. ORGANIZATION'S NAME	7				
	'				
OR 2b. INDIVIDUAL'S SURNAME	FIRST CERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
	0/,				
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
<ol> <li>SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S 3a, ORGANIZATION'S NAME</li> </ol>	ECURED PARTY): Provide on've Secu	red Party name (3a or 3b	0)		
Central Bank Illinois					
			ADDITIONAL NAME(S)/INITIAL(S)   SUFFIX		
	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
00	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
OR 3b. INDIVIDUAL'S SURNAME  3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS 1721 Midtown Rd				<u> </u>	
3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS 1721 Midtown Rd	CITY Peru	STATE	POSTAL CODE 61354	COUNTRY USA	
OR  3b. INDIVIDUAL'S SURNAME  3c. MAILING ADDRESS  1721 Midtown Rd  4. COLLATERAL: This financing statement covers the following collateral:  ALL FIXTURES NOW OWNED OR HEREAFTEI	CITY Peru	STATE	POSTAL CODE 61354	COUNTRY USA	
3b. INDIVIDUAL'S SURNAME  3c. MAILING ADDRESS  1721 Midtown Rd  4. COLLATERAL: This financing statement covers the following collateral:  ALL FIXTURES NOW OWNED OR HEREAFTEI	CITY Peru	STATE	POSTAL CODE 61354	COUNTRY USA	
3b. INDIVIDUAL'S SURNAME  3c. MAILING ADDRESS  1721 Midtown Rd  4. COLLATERAL: This financing statement covers the following collateral:  ALL FIXTURES NOW OWNED OR HEREAFTED ATTACHED EXHIBIT "A".	CITY Peru	STATE II.	POSTAL CODE 61354  RTY DESCRIBED	COUNTRY USA  ON THE 3  S 1  M Y  SC Y  E Y  al Representative	
3b. INDIVIDUAL'S SURNAME  3c. MAILING ADDRESS  1721 Midtown Rd  4. COLLATERAL: This financing statement covers the following collateral:  ALL FIXTURES NOW OWNED OR HEREAFTEI  ATTACHED EXHIBIT "A".	Peru  R AQUIRED LOCATED A	STATE  II.  I THE PROPEI  S) being administer  6b. Check only	POSTAL CODE 61354  RTY D'ESCRIBED	COUNTRY USA  SON THE 3  SOLY  All Representative one box:	

2226508021 Page: 2 of 3

# **UNOFFICIAL COPY**

### **UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS			
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State because Individual Debtor name did not fit, check here	ement; if line 1b was left blank	1	
9a, ORGANIZATION'S NAME		4	
Everclean CW LLC 5			
Evertlean CW LLC 5			
OR 9b. INDIVIDUAL'S SURNAME		-	
FIRST PERSONAL * AN E			
ADDITIONAL NAME(S)/IN' (IA. (S)	SUFFIX	†	
		THE ABOVE SPACE IS FOR FILING OFFI	CE LISE ONLY
10. DEBTOR'S NAME: Provide (10a o 10b only one additional Debtor	name or Debtor name that did not fit		
do not omit, modify, or abbreviate any part of the Debtor's name) and ent	er the mailing address in line 10c	www.	(OSC CASCI, Idii Haile,
10a. ORGANIZATION'S NAME			
OR 10b. INDIVIDUAL'S SURNAME		11	
INDIVIDUAL'S FIRST PERSONAL NAME			
	2		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	OZ.		SUFFIX
	$T_{\bullet}$		
10c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
	SIGNOR SECURED PARTY	I'S NAME: Provide only one name (11a or 11b)	
11a. ORGANIZATION'S NAME	<sup>4</sup> /),	•	
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	TIPDITION AND SOMETHING	ai I <del>aua</del> au
TIB. INDIVIDUAL S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S	S) SUFFIX
11c. MAILING ADDRESS	CITY	STATE   POSTAL CODE	COUNTRY
Tre. William Aborted		JANE POSTACODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):			
12. ADDITIONAL SPACE FOR TIEM 4 (Collateral).		T'_	
		· 5° _	
		(C)	
		0	
13. 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		as a fixture filing
15. Name and address of a RECORD OWNER of real estate described in item (if Debtor does not have a record interest);			
, , , , , , , , , , , , , , , , , , ,	See attached Exhi	ibit "A"	
17. MISCELLANEOUS:			

2226508021 Page: 3 of 3

## **UNOFFICIAL COPY**

#### Exhibit "A"

### PARCEL 6:

LOTS 4 IN C.H. TAYLOR'S SECOND ARLINGTON HEIGHTS ACRES BEING A SUBDIVISION OF THAT PART OF THE NORTHWEST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 21, TOWNSHIP 42 NORTH, RANGE 11, EAST OF THE THIRD PRINCIPAL MERIDIAN LYING SOUTH OF RAND ROAD, IN COOK COUNTY, ILLINOIS.

1318 North Rand Rd Arlington Heights, IL 60004 Pin: 03-21-304-007-0000

ints, a out of County Clark's Office