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Doc#. 2236155253 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

Date: 12/27/2022 03:37 PM Pg: 1 of 3 **UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) 1-800-858-5294 CSC B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 2463 35551 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Illinois (Cook) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only and a bloom of the Individual Debtor's name); if any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of acm / block, check here 🔲 and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX **CRUZ JUAN** C 1c. MAILING ADDRESS 1215 S 3RD AVE STATE COUNTRY CITY POSTAL CODE USA MAYWOOD IL 60153 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use example, on not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here 🔲 and prov. 1e * e * dividual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME FIRST PER JON AL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 2c. MAILING ADDRESS STATE POSTAL CODE COUNTRY 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Se ureo Party name (3a or 3b) 3a. ORGANIZATION'S NAME Foundation Finance Company LLC 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 3c. MAILING ADDRESS 10101 Market Street Suite B100 POSTAL CODE COUNTRY Rothschild 5.1474 **USA** 4. COLLATERAL: This financing statement covers the following collateral: HOME IMPROVEMENT - ROOF INSTALLED ONTO PROPERTY JUAN C CRUZ 1215 S 3RD AVE MAYWOOD, IL 60153

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 Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buy	yer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: :70092316/60368268	0400 0555

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS						
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						
OR - WINNERSON OR ON FRANCE						
96. INDIVIDUAL'S SURNAME CRUZ						
FIRST PERSONAL NAME						
JUAN						
ADDITIONAL NAME(S)INITIALIS)	SUFFIX					
С				IS FOR FILING OFFICE		
10. DEBTOR'S NAME: Provide (10a or 101), or ly one additional Debtor name do not omit, modify, or abbreviate any part of the Debtor's name) and enter the		line 1b or 2b of the F	inancing S	Statement (Form UCC1) (use	exact, full name;	
10a. ORGANIZATION'S NAME						
OR						
10b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(\$)/INITIAL(\$)	Θ_{Z}				SUFFIX	
	T_{\triangle}					
10c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
11. ADDITIONAL SECURED PARTY'S NAME or ASSIG	SNOR SECURE) FARTY	S NAME: Descrido a	alu ana n	omo (11o os 11b)		
11a. ORGANIZATION'S NAME	SNOK SECONED FANT	O NAME. Floride C	any <u>one</u> n	anie (11a or 11b)		
OR						
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	0	ADDITIO	ONAL NAME(S)/INITIAL(S)	SUFFIX	
11c. MAILING ADDRESS	CITY	0	STATE	POSTAL CODE	COUNTRY	
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):			<u></u>			
(2.7.25) (3.7.45) (3.7.45).		•	S			
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				6		
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 o		extracted	collateral is filed as a	fixture filing	
(If Debtor does not have a record interest): JUAN C CRUZ	Legal Description:		HED E	XHIBIT A		
1215 S 3RD AVE	County: COOK, IL					
MAYWOOD, IL 60153	APN: 15-14-122-0					
	Munic/Township: F	PROVISO				
17. MISCELLANEOUS:						

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EXHIBIT "A" - LEGAL DESCRIPTION

LOT 8 AND THE NORTH 1/2 OF LOT 9 IN BLOCK 149 IN MAYWOOD, A SUBDIVISION IN SECTIONS 2, 11 AND 14, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Permanent Real Estate Index Number(s): 15-14-122-014-0000

Address(es) of Real Estate: 1215 S. 3rd Ave, Maywood, Illinois 60153

