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Karen A. Yarbrough
Cook County Clerk
Date: 02/01/2023 11:40 AM Pg: 1 of 3

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141	
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 52892 - Dividend Solar -	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	91148218 ILIL FIXTURE

File with: Cook, IL

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do 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 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME					
OR	1b. INDIVIDUAL'S SURNAME WILLIAMS		FIRST PERSONAL NAME KENNETH	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 622 LARKSPUR LANE		CITY MATTESON	STATE IL	POSTAL CODE 60443	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do 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 provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME Dividend Solar Finance LLC					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 3661 Buchanan Street		CITY San Francisco	STATE CA	POSTAL CODE 94123	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

ALL OF THE DEBTORS RIGHT TITLE AND INTEREST IN HOME IMPROVEMENT PRODUCTS EQUIPMENT AND FIXTURES (CONSUMER GOODS) LOCATED AT OR INSTALLED ON 622 LARKSPUR LANE MATTESON IL 60443 FINANCED BY AND SUBJECT TO DIVIDEND SOLAR FINANCE LLCs PURCHASE MONEY SECURITY INTEREST. IN ADDITION THE SECURITY INTEREST INCLUDES ALL WARRANTIES AND INSURANCE PROCEEDS ISSUED WITH RESPECT TO THE REFERENCED COLLATERAL AND ANY OTHER ECONOMIC BENEFITS RELATED TO THE COLLATERAL THAT DEBTOR MAY RECEIVE OR BE ENTITLED TO AS A RESULT OF THE CONSUMER GOODS.

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:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:

91148218 L22-IL-0267858

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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			
	OR	9b. INDIVIDUAL'S SURNAME	WILLIAMS	
		FIRST PERSONAL NAME	KENNETH	
		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	

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10. DEBTOR'S NAME: Provide (10a or 10b) 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 Debtor'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	CITY	STATE	POSTAL CODE	COUNTRY	

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one 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	STATE	POSTAL CODE	COUNTRY	

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

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 (if Debtor does not have a record interest):

Yulanda R. Shurn-Williams
622 Larkspur Lane
Matteson, IL 60443

16. Description of real estate:

Parcel ID:
31-15-304-026-0000

**LOT 64 IN FINAL PLAT OF BUTTERFIELD PLACE
SUBDIVISION, BEING A SUBDIVISION OF PART OF
THE SOUTH WEST 1/4 OF SECTION 15,
TOWNSHIP 35 NORTH, RANGE 13, EAST OF THE
THIRD PRINCIPAL MERIDIAN, ACCORDING TO
[See Exhibit for Real Estate]**

17. MISCELLANEOUS: 91148218-IL-31 52892 - Dividend Solar - Pro

Dividend Solar Finance LLC

File with: Cook, IL

L22-IL-0267858

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Debtor: WILLIAMS, KENNETH

Exhibit for Real Estate

16. Description of real estate: Continued

THE PLAT THEREOF RECORDED JULY 29, 1988 AS
DOCUMENT NUMBER LR 3727479, IN COOK
COUNTY, ILLINOIS.

Property Address: 622 Larkspur Lane Matteson IL 60443
Cook

Parcel ID: 31-15-304-026-0000

Property of Cook County Clerk's Office

