## **UNOFFICIAL COPY**

Doc#. 2303229132 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

2465 72221

UCC FINANCING STATEMENT	D	ate: 02/01/2023 12:2	5 PM Pg: 1 c	ıf 2	
FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294	1				
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
2465 72221	$\neg$ $\Box$				
CSC 801 Adlai Stevenson Drive					
Springfield II 62702	d In: Illinois				
	(Cook)				
				R FILING OFFICE USE	
1. DEBTOR'S NAME: Provide on, and obtain name (1a or 1b) (use exact, full in name will not fit in line 1b, leave all of .cm / blook, check here and provide in				's name); if any part of the I atement Addendum (Form U	
1a. ORGANIZATION'S NAME	une marvioual Deptor	mornador in item 10 or	ine i manong ot	atement Addendant (Form C	
1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	
Dorich	Alan		A		
1c. MAILING ADDRESS 5236 Oak Center Dr	Oak Lawn		STATE	POSTAL CODE 60453	USA
O DEDICATOR OF THE PARTY OF THE					
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exate of the name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide	The same of the sa			's name); if any part of the I atement Addendum (Form L	
2a. ORGANIZATION'S NAME	7			·	·
20					
2b. INDIVIDUAL'S SURNAME	FIRST PER JON AL	NAME	ADDITIO	NAL NAME(\$)/INITIAL(\$)	SUFFIX
		4		I	
2c. MAILING ADDRESS	CITY	17,	STATE	POSTAL CODE	COUNTRY
OFFILED BARTY'S MANEY AND ADDRESS ADDRESS					
<ol> <li>SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU 38. ORGANIZATION'S NAMETESIA, Inc.</li> </ol>	RED PARTY): Prov	de only <u>one</u> Se Jurea Part	y name (3a or 3t	0)	
,			) .		
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 12832 S Frontrunner Blvd, Suite 100	CITY		8T/TE	POSTAL CODE	COUNTRY
resor of formalinor entry, saids for	Draper		UT	8-1020	USA
4. COLLATERAL: This financing statement covers the following collateral: All energy generation systems and associated compo	<u> </u>		<del></del>	Vic. I	
Party is not taking a security interest in the real prope Secured Partys only security interest is in the specific				going is a lixture).	ITIE
Secured Farty's Only Security Interest is in the specific	Conateral de		SCHOII.	C	
	(see UCC1Ad, item			red by a Decedent's Person	
6a. Check <u>only</u> if applicable and check <u>only</u> one box:  Public-Finance Transaction  Manufactured-Home Transaction	A Dahtar is -	Transmitting Utility		if applicable and check <u>only</u> tural Lien Non-UCC	
	Consignee/Consigno				nsee/Licensor
TO SEE LESSON TO LESSON LOS (II applicable).	oonsign <del>ee</del> roonsigne	· cener/buye	, ∟ ⊳	moorbanor Lice	130C/LICOIISUI

8. OPTIONAL FILER REFERENCE DATA: JB-604533-00 - 31010817

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## **UCC FINANCING STATEMENT ADDENDUM**

NAME OF FIRST BERTOR, A					
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		1			
		1			
9b. INDIVIDUAL'S SURNAME		1			
Dorich		_			
FIRST PERSONAL NAME Alan					
ADDITIONAL NAME(SVINIT(AL/S)	SUFFIX	-			
A		THE ABOVE S	SPACE IS	S FOR FILING OFFICE	USE ONLY
D. DEBTOR'S NAME: Provide (10a or 10', o ly one additional Debtor					
do not omit, modify, or abbreviate any part of the Soblor's name) and ent	ter the mailing address in line 10c				
10a. ORGANIZATION'S NAME					
R 10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	<del>0</del> ,				SUFFIX
	4				33.7.57
c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
	<u> </u>				
1. ADDITIONAL SECURED PARTY'S NAME or AS	SSIGNOR SECURE OF ART	'S NAME: Provide on	nly <u>one</u> nar	me (11a or 11b)	
44 ODOLUZI TIONIO NAME					
11a. ORGANIZATION'S NAME	777	ζ,			
	FIRST PERSONAL NAME		ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
11b. INDIVIDUAL'S SURNAME		C/			
T11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	C/		VAL NAME(S)/INITIAL(S)	SUFFIX
R 11b. INDIVIDUAL'S SURNAME  ic. MAILING ADDRESS		C/			
R 11b. INDIVIDUAL'S SURNAME 1c. MAILING ADDRESS		C/			
R 11b. INDIVIDUAL'S SURNAME 1c. MAILING ADDRESS		C/	STATE	POSTAL CODE	
		C/	STATE	POSTAL CODE	
R 11b. INDIVIDUAL'S SURNAME 1c. MAILING ADDRESS		C/	STATE	POSTAL CODE	
R 11b. INDIVIDUAL'S SURNAME  ic. MAILING ADDRESS		C/	STATE		
Table Individual'S SURNAME  11b. INDIVIDUAL'S SURNAME  2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	CITY	C/	STATE	POSTAL CODE	
c. MAILING ADDRESS  2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  3. IV This FINANCING STATEMENT is to be filed (for record) (or recorded)	city  d) in the 14. This FINANCING STAT	EMENT:	STATE	POSTAL CODE	COUNTRY
c. MAILING ADDRESS  2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  3. This FINANCING STATEMENT is to be filed [for record] (or recorded REAL ESTATE RECORDS (if applicable)	covers timber to b	EMENT:	STATE	POSTAL CODE	COUNTRY
This FINANCING STATEMENT is to be filed [for record] (or recorded REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate described in iten	d) in the    14. This FINANCING STAT    covers timber to be   16. Description of real esta	EMENT: e cut  covers as-e; le:	STATE	POSTAL CODE  Dilateral  is filed as	COUNTRY  a fixture filing
This FINANCING STATEMENT is to be filed (for record) (or recorded REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate described in item (if Debtor does not have a record interest):  Nam A Dorich 5236 Oak Center Dr Oak Lawn II	d) in the 14. This FINANCING STAT  covers timber to be 16. Description of real este A PARCEL OF L OF COOK, WITI	EMENT: e cut	xtracted or	POSTAL CODE  Dilateral  is filed as  HE STATE OF IL	a fixture filing ., COUNTY
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