Doc#. 2304610026 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

Date: 02/15/2023 10:15 AM Pg: 1 of 9

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional) (800) 826-5256 UCC DIVISION	1			
B. E-MAIL CONTACT AT FILER (optional)				
UCC@NCSCREDIT.COM COOK, IL				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	<u> </u>			
NCS UCC SERVICES GROUP PO BOX 24101 CLEVELAND, OH 44124	٦			
USA (800) 826-525f				
(800) 826-3234				
			R FILING OFFICE USE O	
1. DEBTOR'S NAME: Provide only you workfor name (1a or 1b) (use exact, full r name will not fit in line 1b, leave all of item , hichk, check here ☐ and provide t	name; do not omit, modify, or abbreviate any part of the individual Debtor information in item 10 of the Fi			
1a. ORGANIZATION'S NAME 3960 IRVING PARK, INC.				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3960 WEST IRVING PARK	CHICAGO	IL	60618	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use examination name will not fit in line 2b, leave all of item 2 blank, check here and prov. leave				
2a. ORGANIZATION'S NAME	'.e 'dividual Debtor information in item 10 of the Fi	nancing Sta	Tement Addendum (Form OC	
OR 2b. INDIVIDUAL'S SURNAME	FIRST PER SON AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	RED PARTY): Provide only <u>one</u> Ser ureo Party nam	ie (3a or 3b)	
3a. ORGANIZATION'S NAME WORLD FUEL SERVICES, INC.	<u>C/</u>			
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	JADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
SI. INDIVIDUAL S SURVANIE	FIRST PERSONAL NAME	ADDITION	WE NAME(S) INTIME(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE TO	POSTAL CODE	COUNTRY
9800 NW 41ST STREET	MIAMI	FL	33178	USA
4. COLLATERAL: This financing statement covers the following collateral: Debtor hereby grants to Secured party a	continuing security inte	erest	in the "Colla	teral"
to secure the payment of all sums that				
of gasoline or petroleum products from				
all obligations of any and every kind an				
Debtor to Secured Party, however incurr		_		
contingent or otherwise, whether arising agreements, mortgages, leases, instrumen				
heretofore, now or hereafter executed by				
oral agreement or created by operation o			-	-
"Liabilities") plus all interest, costs,	expenses, and actual at	torne	ys' fees, which	ch may
Please see attached Addendum Form(s) for	Additional Collateral			
Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and Instructions) being	ı administer	red by a Decedent's Personal	Representative
Ba. Check only if applicable and check only one box:	·		f applicable and check <u>only</u> or	
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transmitting Utility	_ `	tural Lien Non-UCC F	
	Consignee/Consignor Seller/Buyer			ee/Licensor
8 OBTIONAL FILED DECEDENCE DATA:				

UCC# U332327 REF# 659457

FO	LOW INSTRUCTIONS							
	IAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if lecause Individual Debtor name did not fit, check here	line 1b was left	: blank					
	9a, ORGANIZATION'S NAME							
	3960 IRVING PARK, INC.							
OR	9b, INDIVIDUAL'S SURNAME							
	FIRST PERSONAL NAME							
	ADDITIONAL NAME(S)/INT, IAI (S)	:	SUFFIX					
				THE ABOVE	SPACE I	S FOR FILING OFFIC	E USE ONLY	
10.	DEBTOR'S NAME: Provide (10a or 10°, o, ly one additional Debtor name or do not omit, modify, or abbreviate any part of the bobtor's name) and enter the man	Debtor name ti	hat did not fit in n line 10c					
	10a. ORGANIZATION'S NAME							
OR	10b. INDIVIDUAL'S SURNAME							
	INDIVIDUAL'S FIRST PERSONAL NAME							
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11.	ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO	OR SECUR	F) PARTY	NAME: Provide o	nly one na	me (11a or 11b)	<u>'</u>	
• • • •	11a. ORGANIZATION'S NAME			- 10 111 - 1 1 1 1 1 1 1 1	,,, <u>4114 11</u>			
OR	11b. INDIVIDUAL'S SURNAME	FIRST PERSO	ONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S) SUFFIX	
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11c.	MAILING ADDRESS	CITY		(Q)	STATE	POSTAL CODE	COUNTRY	
12	ADDITIONAL SPACE FOR ITEM 4 (Collateral):			 -1		ı		
'~ <u>'</u> }	ADDITIONAL SPACE FOR ITEM 4 (Collateral): be made or incurred by Secured Party in	n the c	ollectio	on of said	. Liak	ilities, and	d in the	
pı	rotection, maintenance, and liquidation	n of th	e Collat	eral. All	stat	ements of a	ccount	
	endered by Secured Party to Debtor rela							
	f principal, interest, expenses and cos			·				
	resumed correct and accurate and const							
	ecured Party unless, within ten (10) da							
	deliver to Secured Party by registered							
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13.	This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINA	NCING STATE	MENT:		_		
	,	cover	rs timber to be o	ut covers as-	extracted o	collateralis filed a	s a fixture filing	
	Name and address of a RECORD OWNER of real estate described in item 16 (If Debtor does not have a record Interest):	16. Description	n of real estate:					
	II Debiot does not have a record interesty.							
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17.	MISCELLANEOUS:							

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	IAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if pecause Individual Debtor name did not fit, check here	line 1b was lef	t blank					
	9a. ORGANIZATION'S NAME							
	3960 IRVING PARK, INC.							
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OR	9b. INDIVIDUAL'S SURNAME							
	FIRST PERSONAL NAME							
	ADDITIONAL NAME(S)/IN", IAI (S)		SUFFIX					
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10.	DEBTOR'S NAME: Provide (10a or 10°.) or ly one additional Debtor name or	Debtor name t	hat did not fit in					
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11.	ADDITIONAL SECURED PARTY'S NAME of ASSIGNO	OR SECUR	ED PARTY!	S NAME: Provide	onkrone n	me /11s or 1	1h\	
٠	11a. ORGANIZATION'S NAME	011.020011		- 10 till . 1 10 tild	v 4111) <u>viiv</u> 11	4 1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	167	
OR	11b. INDIVIDUAL'S SURNAME	FIRST PERS	ONAL NAME		ADDITIO	NAL NAME(S	S)/INITIAL(S)	SUFFIX
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11c	MAILING ADDRESS	CITY		10	STATE	POSTAL CO	ODE	COUNTRY
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12.	ADDITIONAL SPACE FOR ITEM 4 (Collateral): is principal place of business, writter	n objec	tion th	oroto coc	ai fuir	a tha	orror o	^
Δ.	crors, if any, contained in any such s	tataman	t The	"Collater	a 1 cr	rad	hu this	_
	greement is all of the Debtor's proper							rihed
	elow, which it now owns or shall herea:							
	equisition or creation thereof, and in-							
	any schedule or list attached hereto							
	nattel Paper, Instruments, Contract Ric							
C.	racted raper, instruments, contract has	91100, 0	CITCLAL	Incangibi	CD, 11	iciuaii.	igarr ri	igiic co
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	(If Debtor does not have a record Interest):							
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	NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if pecause Individual Debtor name did not fit, check here	line 1b was left b	lank				
	98, ORGANIZATION'S NAME						
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	3960 IRVING PARK, INC.						
OR	9b. INDIVIDUAL'S SURNAME						
	SD. INDIVIDUAL S SURVAIME						
	FIRST PERSONAL NAME						
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10.	DEBTOR'S NAME: Provide (10a or 10°, or ly one additional Debtor name or do not omit, modify, or abbreviate any part of the popular's name) and enter the m	Debtor name tha	t did not fit in l line 10c	line 1b or 2b of the F	inancing S	tatement (Form UCC1) (use	e exact, full name;
	10a. ORGANIZATION'S NAME						
OR	10b. INDIVIDUAL'S SURNAME						
	INDIVIDUAL'S FIRST PERSONAL NAME						
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11.	ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO	OR SECLIBE) PARTYS	S NAME: Provide of	nh: ana n	(11a or 11b)	
11.	ADDITIONAL SECOND PARTY S NAME OF ASSISTA	OK SECONE		3 INMINE. Floride C	nny <u>orie</u> na	ille (ila or ilb)	
	TTB. ORGANIZATIONS NAME		' / X,				
OR							
J.	11b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	0	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
11c.	MAILING ADDRESS	CITY		0	STATE	POSTAL CODE	COUNTRY
40	ADDITIONAL SPACE FOR ITEM 4 (Collateral):			 -1			
01 1:	any refund of any taxes heretofore or loof which are hereinafter individually agardless of whether any such Accounts whether any such Accounts have been stattached hereto or otherwise given and Goods, now owned or hereafter acquis	and collare acc schedule to Secu	ectivel eptable d to Se red Par	ly referre e or unacc ecured Par rty; (B) I	d to eptac ty or nvent	as "Accounts" ple to Secured a Pay schedule cory, 111 Inve	"), d Party e or entory
	petroleum products acquired, maintained						
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13.	This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANC					
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FO	LLOW INSTRUCTIONS						
	NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if lecause Individual Debtor name did not fit, check here	line 1b was left	blank				
	9a. ORGANIZATION'S NAME						
	3960 IRVING PARK, INC.						
	3900 IRVING PARK, INC.						
OR	9b, INDIVIDUAL'S SURNAME						
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	FIRST PERSONAL NAME						
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10.	DEBTOR'S NAME: Provide (10a or 10°2) or ly one additional Debtor name or	Debtor name ti	hat did not fit in l	ine 1b or 2b of the F	inancing S	tatement (Form UCC1) (use	exact, full name:
	do not omit, modify, or abbreviate any part of the potents name) and enter the ma						
	10a, ORGANIZATION'S NAME						
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OR	10b. INDIVIDUAL'S SURNAME						
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11.	ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO	OR SECUR	E) PARTY'S	NAME: Provide of	nly one na	me (11a or 11b)	•
	11a. ORGANIZATION'S NAME					,	
OR	11b. INDIVIDUAL'S SURNAME	FIRST PERSO	ONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
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11c.	MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
12.	ADDITIONAL SPACE FOR ITEM 4 (Collateral): 50618 and all raw materials, work in pa			7			_
(60618 and all raw màteriáls, work in p	rocess,	finishe	ed goods,	tangi	.ble property,	stock
	n trade, wares, and merchandise used in						
iı	ncluding goods whose sale, lease or oth	her dis	positior	n by Debto	r ha	g ven rise t	o any
	ccounts, and which goods have been retu						Į.
tı	ransit by Debtor; and (C) Equipment. A	ll equi;	pment ar	nd fixture	s, in	cluding all	
	achinery, furniture, furnishings, and w						rts,
	ttachments, accessories, tools and dies						
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13.	This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14 This FINA	NCING STATEM	MENIT:			
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	(If Debtor does not have a record interest):	TO. Description	iii Oi i dai dolalo.				
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	98, ORGANIZATION'S NAME						
	3960 IRVING PARK, INC.						
OR	9b. INDIVIDUAL'S SURNAME						
	S. INDIVIDUAL OF STATE OF STAT						
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10.	DEBTOR'S NAME: Provide (10a or 10') o ly one additional Debtor name or do not omit, modify, or abbreviate any part of the publior's name) and enter the ma			line 15 or 25 of the F	Inancing S	tatement (Form UCC1) (I	use exact, tull name;
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	10a, ORGANIZATION'S NAME						
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OR	11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL N	AME.		ADDITIO	NAL NAME(S)/INITIAL(S) SUFFIX
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11c.	MAILING ADDRESS	CITY		0	STATE	POSTAL CODE	COUNTRY
12. at	ADDITIONAL SPACE FOR ITEM 4 (Collateral): ctached, kept, used, or intended for us	se in conne	ectio	on therewi	thO a	nd all	
	abstitutions, improvements and replacer						(D)
	eposits. All amounts which are, or here						
	its affiliates; (E) Deposit Accounts,		_	•		_	_
	ights. All Deposit Accounts with any en						
	ights: (F) Proceeds and Products. All p						
	coceeds of hazard insurance and eminent						
Ъ	loceeds of mazard insurance and emiment	c domain or		ideliliacioi.	awai	us or all o	I the
13.	This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING					
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	(If Debtor does not have a record interest):	TO. Description of rea	11 0 01010.				
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	9a, ORGANIZATION'S NAME						
	3960 IRVING PARK, INC.						
OR	9b. INDIVIDUAL'S SURNAME						
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10.	DEBTOR'S NAME: Provide (10a or 10°, o, ly <u>one</u> additional Debtor name or do not omit, modify, or abbreviate any part of the bubbor's name) and enter the ma	Deptor name t Siling address	nat did not lit in in line 10c	line 10 or 20 of the F	Inancing S	tatement (Form UCC1) (use	exact, tuil name;
	10a, ORGANIZATION'S NAME	Militig addition					
	TOR, ORGANIZATION'S NAME						
OR	10b. INDIVIDUAL'S SURNAME						
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10c.	MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
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11.	ADDITIONAL SECURED PARTY'S NAME or ASSIGNO	OR SECUR	ED PARTYS	S NAME: Provide of	only one na	ime (11a or 11b)	
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OR	11b. INDIVIDUAL'S SURNAME	FIRST PERS	ONAL NAME	0.	ADDITIO	NAL NAME(\$)/INITIAL(\$)	SUFFIX
11c	MAILING ADDRESS	CITY		<u> </u>	STATE	POSTAL CODE	COUNTRY
				CVA			
12.	ADDITIONAL SPACE FOR ITEM 4 (Collateral):			 -/		1	
	ADDITIONAL SPACE FOR ITEM 4 (Collateral): pregoing described properties or intere						of,
	d accessions to, such properties or in						
	posits or other sums at any time cred						
aí	filiates to Debtor and any and all ins	strumen	ts, docu	uments, po	licie	s ara certifi	cates
of	insurance, securities, goods, account	ts rece	ivable,	chattel p	aper,	cash proper	ty and
tŀ	e proceeds thereof (whether or not the	e same	are Coli	lateral or	Proc	eeds thoreof	-
	reunder) owned by Debtor or in which I						t any
	•						-
13.	This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14 This FINA	NCING STATE	MENT:			
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15.1	Name and address of a RECORD OWNER of real estate described in item 16		on of real estate:		0,12 40,104	- Io mod de d	interior ining
•	If Debtor does not have a record Interest):						
47	WIGGELL ANEQUE.						
17.	MISCELLANEOUS:						

FOLLOW INSTRUCTIONS					
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if because Individual Debtor name did not fit, check here □	line 1b was left blank				
<u> </u>					
99. ORGANIZATION'S NAME 3960 IRVING PARK, INC.					
3900 IRVING PARK, INC.					
OR ON INDIVIDUALIS SUBMANE					
9b. INDIVIDUAL'S SURNAME					
FIRST PERSONAL NAME					
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96		THE AB	OVE SPACE	IS FOR FILING OFFICE	E USE ONLY
10. DEBTOR'S NAME: Provide (10a or 10°2) or ly one additional Debtor name or			the Financing	Statement (Form UCC1) (u:	se exact, full name;
do not omit, modify, or abbreviate any part of the poblor's name) and enter the m	ailing address in line 10	c			
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		しっ			
11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
		6			
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):			7		
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): time hereafter in the possession or con-	trol of Sec	ured Party	or in	transit by ma	il or
carrier to or from Secured Party or in					
Secured Party's behalf, without regard					
pledge, for safekeeping, as agent for co			sion or	ornerwise, c	r
whether Secured Party has conditionally	rereased t	ne same.			
13 This FINANCING STATEMENT is to be filed (for record) (or recorded) in the	14. This FINANCING	TATEMENT:			
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15. Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real		19 99-CYLACICA	collateral P is lifed as	a lixidre lilling
(If Debtor does not have a record interest):	,				
3960 Irving Corp	APN - 13-1				
PO Box 1048, Morristown, TN 37816-1048	Alternate .				
	_	_		see attached	
Property Address - 3960 West Irving	Twnshp-Rng				
Park, Chicago, IL 60618	Legal Lot	A RTOCK -	14 / 2		
17. MISCELLANEOUS:					

-2304610026 Page: 9 of 9₂₇D Books 2 of 4

UNOFFICIAL COPY

Lots 13, 14 and 15 in Block 2 in Edwards and Danna's Addition to Irving Park, A Subdivision of the South West 1/4 of the South West 1/4 of Section 14, Township 40 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois.

Street Address:

5960 West Irving Park Road, Chicago, Illinois

Permanen'. Ir dex Numbers:

13-1/-326-020-0000

13-14-326-021-0000

Or Coot County Clert's Office 13-14-326-022-0000