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NOTICE OF BUSINESS BROKER LIEN.

(815 ILCS 307/10, et seq.)

Date of Notice: March 13, 2023

Doc# 2307215047 Fee \$88.00

RHSP FEE: \$9.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH COOK COUNTY CLERK

DATE: 03/13/2023 03:37 PM PG: 1 OF 2

NOTICE 'S) IEREBY GIVEN, that the undersigned, person authorized to sign on behalf of a duly registered Illinoic Business Broker, hereby claims a lien against the assets and/or the proceeds of the sale of all or any portion of the assets of the below stated business for brokerage commissions earned pursuant to Section 115 of the Illinois Business Brokers Act of 1995 (815 ILCS 307/10-115) including the related sale and/or proceeds of the sale of real property legally described as follows:

Legal Description: LOTS 1, 2, 3 AND ATN BLOCK I IN GEORGE F. NIXON AND COMPANY'S OAKTON AND CRAWFORD SUBDIVISION IN THE NORTHWEST 1/4 OF SECTION 26, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Permanent Index Number: 10-26-100-043-0000

Property Address: 3901 Oakton Street, Skokie, Illinois 60076

Name of Broker (Claimant): SCHWALB ENTERPRISES, INC.

d/b/a SCHWALB CORPORATE ADVISORY Business Broker Registration No. 310001918

790 Estate Drive, Suite 200 Deerfield, Illinois 60015

Name of Business Being Sold: EXCELLENT HOME HEALTH CARE,

3901 W. Oakton Street Skokie, Illinois 60076

Description of Business: Home Health Care Agency

Owner of Real Property: LISING LIVING TRUST dated May 5, 2004

9325 Nashville Avenue

Morton Grove, Illinois 60053

Sellers (whose EXCELLENT HOME HEALTH CARE, INC.

assets are subject 3901 W. Oakton Street

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to the claimed lien):

Skokie, Illinois 60076 ATTN: Fructuosa Lising

EXCELLENT HOME HEALTH CARE, INC.

3901 W. Oakton Street Skokie, Illinois 60076 ATTN: Benjamin Lising

Amount Claimed: To the best of Broker's knowledge, \$65,000.00, or 10% of the eventual sales price, per the Business Broker Contract dated June 13, 2022 between Broker and Sellers.

The information contained in this NOTICE OF BUSINESS BROKER LIEN is true and accurate to the knowledge of CRAIG M. CAPILLA, authorized signator on behalf of Broker.

IN WITNESS WHERFOF, the undersigned has caused his name to be signed to this

instrument this 13th day of March, 2023.

CRAIG M. CAPILLA

STATE OF ILLINOIS

SS.

COUNTY OF COOK

I, the undersigned, a Notary Public, in and for the County and State aforesaid, DO HEREBY CERTIFY, that CRAIG M. CAPILLA, authorized on behalf of Broker, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that he signed, sealed and delivered the said instrument as his free and voluntary act, for the uses and purposes therein set forth.

Given under my hand and official seal this this 13th day of March, 2023.

OFFICIAL SEAL
GABRIELLE R PEARLMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPRESIONALS

My commission expires: $\frac{OO/O}{}$

agarlewicz@fgcclaw.com

This instrument was prepared by:

Adam J. Garlewicz, Esq. Franklin, Greenswag, Channon & Capilla, LLC 181 Waukegan Road, Suite 205 Northfield, Illinois 60093 RETURN TO:

Adam J. Garlewicz, Esq. Franklin, Greenswag, Channon & Capilla, LLC 181 Waukegan Road, Suite 205 Northfield, Illinois 60093