Doc#. 2322606279 Fee: \$107.00

Karen A. Yarbrough Cook County Clerk

Date: 00/44/2022 02:24 DM Dat 1 of 2

CC FINANCING STATEMENT DLLOW INSTRUCTIONS			Date: 08/14/2023 02:3	+ FIVI Fy. 1)I Z	
. NAME & PHONE OF CONTACT AT FILER (optional) lame: Wolters Kluwer Lien Solutions Phone: 800-33	1_3080 Fav. 9	18_662 4144	<u>'</u>]			
. E-MAIL CONTACT AT FILER (optional)	1-3202 Fax. 0	10-002-4141	·			
uccfilingreturn@wolterskluwer.com						
SEND ACKNOWLEDGMENT TO: (Name and Address)	53679 - Laun	ch - Enium	1			
Lien Solutions	94474918					
P.O. Box 29071						
Glendale, CA 91209-9071	ILIL					
FIXTUI		JRE				
File with Cook, IL			THE ABOVE	SPACE IS F	OR FILING OFFICE U	SE ONLY
DEBTOR'S NAME: Provide only Centor name (1a or 1b)						
ame will not fit in line 1b, leave all of iten 1.5k; check here	and provide th	e Individual Debt	or information in item 10 of t	he Financing St	atement Addendum (Form	UGC1Ad)
IN SINGS AND INSING PERMIT						
1b. INDIVIDUAL'S SURNAME		FIRST PERSONA	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Martinez	X	Alma				
MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
311 S Merrimac Ave	<u> </u>	Chicago		IL	60638	USA
EBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) ame will not fit in line 2b. leave all of item 2 blank, check here			modify, or abbreviate any p or information in item 10 of tl			
2a. ORGANIZATION'S NAME						,
2b. INDIVIDUAL'S SURNAME		FIRST PERS JNA	. NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS		CITY	4,	STATE	POSTAL CODE	COUNTRY
MAILING ADDRESS		CIT	17	SIAIE	POSTAL CODE	COONIKI
SECURED PARTY'S NAME (or NAME of ASSIGNEE of AS	SSIGNOR SECUE	L RED PARTY): Pro	vide only one Serureo Part	y name (3a or 3	L b)	
3a. ORGANIZATION'S NAME						
Genisys Credit Union		T				T
3b. INDIVIDUAL'S SURNAME		FIRST PERSONA	LNAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
100 Executive Hills Blvd		Auburn Hills	<u>.</u>	М	48 326	USA
COLLATERAL: This financing statement overs the following co RCHASE MONEY SECURITY INTEREST IN SOLA OTOVALTAIC SOLAR ENERGY EQUIPMENT (IF ECTRICAL INVERTERS, MICROINVERTERS OR D ADDITIONS OR REPLACEMENTS OF THE SAI SPECT TO THE REFERENCED COLLATERAL.	AR PRODUC' ANY), INCLU POWER OPT	DING BUT NO IMIZERS, CA	OT LIMITED TO ROOI BLES AND WIRES, S	FTOP OR G UPPORT BI	ROUND MOUNT SO RACKETS, F.SLATED	LAR PANELS, DEQUIPMENT
Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is Check <u>only</u> if applicable and check <u>only</u> one box:	held in a Trust o	_			red by a Decedent's Persif applicable and check o	nly one box:

Agricultural Lien Non-UCC Filing Bailee/Bailor Licensee/Licensor LenderCode GENSCU Prepared by Lien Solutions, P.O. Box 29071, Glendale. CA 91209-9071 Tel (800) 331-3282

Seller/Buyer

Consignee/Consignor

LoanID 471331

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor

8. OPTIONAL FILER REFERENCE DATA:

94474918

UNOFFICIAL COPY

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS						
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State because Individual Debtor name did not fit, check here						
9a. ORGANIZATION'S NAME						
OR 9b. INDIVIDUAL'S SURNAME						
Martinez						
FIRST PERSONAL NAME						
Alma						
ADDITIONAL NAME(S)INITIAL (S)	SUFF	FIX				
		THE ABO	VE SPAC	E IS FOR FILING OFFI	CE USE ONLY	
10. DEBTOR'S NAME: Provide (10a or 100' only one additional Debt	tor name or Debtor name that die	d not fit in line 1b or 2b of the	Financing S	tatement (Form UCC1) (us-	e exact, full name;	
do not omit, modify, or abbreviate any part of the Petion's name) and e	enter the mailing address in line	10c				
10a. ORGANIZATION'S NAME						
OR 10b. INDIVIDUAL'S SURNAME	,					
IND. INDIVIDUALO GONIVANIE						
INDIVIDUAL'S FIRST PERSONAL NAME						
,	- O ₂					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	O Z				SUFFIX	
	τ_{\sim}					
10c. MAILING ADDRESS	ату		STATE	POSTAL CODE	COUNTRY	
11. ADDITIONAL SECURED PARTY'S NAME OF	ASSIGNOR SECURED PA	JTYS NAME: Provide o	nly one nam) (11a or 11b)		
11a. ORGANIZATION'S NAME	ACCIONON CECONED ()	TO TVAIVIL. THOUGH	nny <u>one</u> nan	ie (Tra or Trb)		
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL N	IAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
11c. MAILING ADDRESS	QITY		STATE	POSTAL CODE	COUNTRY	
		C)	1			
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		4				
			0.			
				1/5		
				· (C-		
				6		
13. This FINANCING STATEMENT is to be filed [for record] (or reco	orded) in the 14. This FINANCII	NG STATEMENT:				
REAL ESTATE RECORDS (if applicable)	covers tim	ber 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 (if Debtor does not have a record interest):	in item 16 16. Description of	real estate:				
	l enal De	scription DIST:	72 CIT	Y/MILINI/T\//P·I	ΔKE	
Legal Description DIST:72 CITY/MUNI/TWP SEC/TWN/RNG/MER:SEC 08 TWN 38N RN APN 19-08-319-054						
	Section. I	-///L				
17. MISCELLANEOUS: 94474918-IL-31 53679 - Launch - Enium	Ganicye Crodit Union	File with: Cook. IL	LoonID 4	71331 LenderCode GENSCU		
17. MIDOELLANEOUS, 94474910-11-51 33079 - EXUNCIT- EHIUM	Genisys Credit Union	File With COOK, IL	LualiiD 4	A TOO I LONGUE COURT CENSOUU		