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2324315039

213179

Recording requested by, and after recording, return to:
Gary A. Weintraub
Gary A. Weintraub, P.C.
465 Central Ave.
Suite 100
Northfield, Illinois 60093

1000 PM

Doc# 2324315039 Fee \$88.00

RHSP FEE:\$18.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 08/31/2023 02:15 PM PG: 1 OF 5

MEMORANDUM OF SUBLEASE

THIS MEMORANDUM OF SUBLEASE ("Memorandum of Sublease") is executed as of July 31, 2023, by and between Forest River Master Tenant LLC, an Illinois limited liability company (hereinafter called the 'Lessor"), and Forest Edge Healthcare & Rehabilitation Center, LLC, an Illinois limited liability company (hereinafter called the "Lessee").

RFCITALS

WHEREAS, Forest Edge Healthcare & Rehabilitation Center Realty LLC and Lessor have entered into that certain Master Lease covering certain land as more particularly described in Exhibit A attached hereto and incorporated herein by this reference (the "Premises") and improved with a nursing facility, together with Lessor's easements and apputenants in adjoining and adjacent land, highways, roads, streets lands, whether public or private, reasonably required for the installation, maintenance, operation and service of sewer, water, gas, power and other utility lines and for driveways and approaches to and from abutting highways for the use and benefit of the above-described parcel of real estate located at 8001 S. Western Ave., Chicago, County of Cook, State of Illinois.

WHEREAS, Lessor and Lessee have executed that certain Sublease Agreement (the "Sublease") dated July 31, 2023, covering and for the Premises.

WHEREAS, Lessor and Lessee desire to record notice of the Sublease in the public records of Cook, Illinois.

NOW THEREFORE, in consideration of the foregoing, Lessor and Lessee hereby declare as follows:

1. <u>Demise</u>. Lessor hereby subleases the Property to Lessee and Lessee hereby subleases the property from Lessor, subject to the terms, covenants and conditions contained in the Sublease

2324315039 Page: 2 of 5

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2. Expiration Date. The term of the Sublease ("Term") commenced on July 31, 2023, and shall expire on December 31, 2057, unless sooner terminated or extended as provided in the Sublease.

[SIGNATURE PAGES FOLLOW]

TESICE

COOK COUNTY CLERK OFFICE RECORDING DIVISION 118 N. CLARK ST. RUG M 120 CHICAGO, IL 60602-1387

COOK COUNTY CLERK OFFICE RECORDING DIVISION 118 N. CLARK ST. ROOM 120 CHICAGO, IL 60602-3387

2324315039 Page: 3 of 5

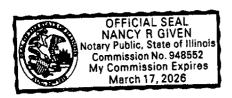
UNOFFICIAL COPY

SIGNATURE PAGE TO MEMORANDUM OF SUBLEASE

IN WITNESS WHEREOF, the undersigned have executed this instrument as of the day and year first above written.

| <u>LESSOR:</u> |
|--|
| Forest River Master Tenant LLC, an Illinois limited liability company |
| By: Name: Its: |
| Ox |
| ACKNOWLEDGMENT |
| STATE OF ILLINIOIS) SS |
| COUNTY OF COOK) |
| On this day of July, 2023, before me, the undersigned, a Notary Public in and for said State, do hereby certify that Avrum Weinfeld, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument as a Manager of Forest River Master Tenant LLC, and acknowledged to me that he executed the same in his capacity, and that by his signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrumer. |
| [SEAL] Notary Public |
| My Commission Expires: 3につして |
| |

(SIGNATURE PAGES CONTINUE)



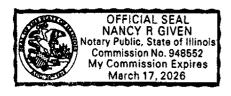
2324315039 Page: 4 of 5

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SIGNATURE PAGE TO MEMORANDUM OF SUBLEASE

IN WITNESS WHEREOF, the undersigned have executed this instrument as of the day and year first above written.

| LESSEE: |
|--|
| Forest Edge Healthcare & Rehabilitation Center, LLC, an Illinois simited liability company |
| By: Name: Avron- western |
| Its: |
| |
| ACKNOWLEDGMENT |
| |
| STATE OF ILLINOIS) |
| COUNTY OF ILLINOIS) SS |
| On this 19th day of July, 2023, before me, the undersigned, a Notary Public in and for said State, do hereby certify that Avrum Weinfeld, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument as a Manager of Forest Edge Healthcare & Rehabilitation Center, LLC, and |
| acknowledged to me that he executed the same in his capacity, and that by his signature on the instrument, the individual, or the person upon behalf of which the individual acted executed the instrument. |
| [SEAL] Notary Public |
| My Commission Expires: _ 3 に 202し |



2324315039 Page: 5 of 5

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EXHIBIT A

LEGAL DESCRIPTION

Lots 18 to 28 both inclusive, in Block 3 in C.H. Beckwith's Subdivision of Blocks 14 and 15 in Hunter's Subdivision of the Northwest ¼ of Section 31, Township 38 North, Range 14 East of the Third Principal Meridian in Cook County, Illinois.

to 28 both inci.
15 in Hunter's Su.
16 rth, Range 14 East of ti.

Sommon address: 8001 S. Wes.

P.I.M.: 20-31-108-044-0000