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Doc#. 2333933101 Fee: \$107.00

Karen A. Yarbrough Cook County Clerk

Date: 12/05/2023 10:08 AM Pg: 1 of 3

UCC FINANCING STATEMENT

I OLLOW INCTROCTIONS						
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294	j					
B. E-MAIL CONTACT AT SUBMITTER (optional)						
SPRFiling@cscglobal.com						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
2702 93782	\neg \Box					
CSC	ı ı					
801 Adlai Stevenson Drive						
Springfield, IL 62703 File	ed In: Illinois					
	(Cook)					
SEE BELOW FOR SECURED PARTY CONTACT INFORMA	TION	THE ABOVE SDA	~E IQ EA	R FILING OFFICE USE O	NII V	
4 DEPTOP'S NAME, Durids at a filter of the second of the s						
1. DEBTOR'S NAME: Provide only Control name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, cick here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)						
1a. ORGANIZATION'S NAME						
OR						
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
KUYKENDOLL	MARCUS					
1c. MAILING ADDRESS 12120 S NORMAL AVE # 1	CITY		STATE	POSTAL CODE	COUNTRY	
	CHICAGO		IL	60628-6310	USA	
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full, p.	r⊐e: do not omit, mod	ify, or abbreviate any part of the De	ebtor's nan	ne): if any part of the Individual I	Debtor's name will	
		nformation in item 10 of the Financin				
2a. ORGANIZATION'S NAME	7					
	'					
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSON N	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
20. INDIVIDUAL 3 SUMMINE	I II O I FELI SOLVIE IVANIE		1001110	ACE INCHIECOPHIA INCE(O)	301117	
		4-				
2c. MAILING ADDRESS	CITY	1) x.	STATE	POSTAL CODE	COUNTRY	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secure a Pai 'y name (3a or 3b)						
3a. ORGANIZATION'S NAME Aqua Finance, Inc.		し				
'						
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
		1/1				
3c. MAILING ADDRESS One Corporate Drive Suite 300	CITY		STATE	POSTAL CODE	COUNTRY	
of Maring Applicas Offe Corporate Drive Suite 500	Wausau		Wi	15.1401	USA	
	- radoad)	30,1	
4. COLLATERAL: This financing statement covers the following collateral: HOME IMPROVEMENT				175		
BASEMENT WATERPROOFING						
DAOLIVILIY I WATERFROOFING				(2)		
				C		

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	being administered by a Decedent's Personal Representative
6a. Check only if applicable and check only one box:	6b. Check only if applicable and check only one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/B	suyer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: AAAS\0.04157962	0700.0070

2702 93782

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME **KUYKENDOLL** FIRST PERSONAL NAME **MARCUS** ADDITIONAL NAME(S)/INIT/AL(S) SUFFIX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 100 ni one one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Dritor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME OR 10ь. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS COUNTRY ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): Office 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) covers as-extracted collateral is filed as a fixture filing covers timber to be cut 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: MARCUS KUYKENDOLL 12120 S NORMAL AVE # 1 CHICAGO, IL 60628-6310 12120 S NORMAL AVE # 1 County COOK COUNTY CHICAGO, IL 60628-6310 Parcel Number 25-28-121-023 Brief Description: (WEST)(PULLMAN) IN WH OF NE & NW NH SEC 28-37-14 SEE ATTACHED FOR FULL LEGAL 17. MISCELLANEOUS:

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Full Legal Description

LOT 9 AND THE SOUTH ¼ OF LOT 8 IN BLOCK 31 IN WEST PULLMAN, A SUBDIVISION IN THE NORTHWEST ¼ AND THE WEST ½ OF THE NORTHEAST ¼ OF SECTION 28, TOWNSHIP 37 NORTH , RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

