

Doc#. 2406828115 Fee: \$107.00 KAREN A. YARBROUGH COOK COUNTY CLERK'S OFFICE Date 3/8/2024 12:51 PM Pg: 1 of 3

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294					
B. E-MAIL CONTACT AT SUBMITTER (optional)					
SPRFiling@cscglobal.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
2775 64809					
l csc	1				
801 Adlai Stevenson Drive					
Springfield, IL 62703	led In: Illinois				
	(Cook)				
SEE BELOW FOR SECURED PARTY CONTACT INFORMA	ATION	THE ABOVE SPACE	CE IS FO	R FILING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide only not fit in line 1b, leave all of item 1 blank, clack bute	name; do not omit, modify, or ab le the Individual Debtor informatio	* '			al Debtor's name will
	e the marviabal Debtor informatio	intinteni 10 orther mancing	y Materiner	it Addendam (Form occ FAG)	
1a. ORGANIZATION'S NAME					
OR					
16. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
MCNELTY	MICHAEL				
1c. MAILING ADDRESS 1327 S KILDARE AVE	CITY		STATE	POSTAL CODE	COUNTRY
	CHICAGO		IL	60623	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full			La		(Daha dana ara ara
	e the Inclividual Debtor informatio				i Deptors name will
2a. ORGANIZATION'S NAME		•			
22. ORGANIZATION S NAME					
OR					I
2b. INDIVIDUAL'S SURNAME	FIRST PERSON AL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	(/_				
2c. MAILING ADDRESS	CITY	¥*	STATE	POSTAL CODE	COUNTRY
		7			
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY'S NAME (OR NAME OF ASSIGNOR SECURED PARTY P	IRED PARTY): Provide only one	Secure Party name (3a	or 3h)		
3a. ORGANIZATION'S NAME Aqua Finance, Inc.	STED FACTY. Trovide only one	2 Occal, 11 al Vilalie (se	01 00,		
Aqua i manoo, mo.					
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
30. INDIVIDUAL 3 GOTTANIL	TINOT FENODIAL NAME		ADDITIO	MAC MANUE (O) MATTACE (O)	301112
		Ť.			
3c. MAILING ADDRESS One Corporate Drive Suite 300	CITY		OT TE	POSTAL CODE	COUNTRY
	Wausau		ΜI	5.1401	USA
4. COLLATERAL: This financing statement covers the following collateral: WALK IN TUB	'			U.S.	1
WALK IN TUB					
				10-	

5. Check only if applicable and check only one box: Collateral is held in a Trust (s	see UCC1Ad, item 17 and Instructions)	being administered by a Deced	lent's Personal Representative
6a. Check only if applicable and check only one box:		6b. Check only if applicable and	d check <u>only</u> 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/Buye	er Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: AFIS004261803			2775 6490

2775 64809

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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 **MCNELTY** FIRST PERSONAL NAME MICHAEL 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 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 timber to be cut is filed as a fixture filing covers as-extracted collateral 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): MICHAEL MCNELTY 1327 S KILDARE AVE CHICAGO, IL 60623-1132 1327 S KILDARE AVE COUNTY COOK COUNTY CHICAGO, IL 60623-1132 PARCEL NUMBER 16-22-210-009 SEE FULL LEGAL ATTACHED 17. MISCELLANEOUS:

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Lot 38 in Block 3 in Francis P. Casey's Subdivision of Blocks 1 to 4 in L.C. Paine Free's Subdivision (as Receiver) of the West half of the Northeast Quarter of Section 22, Township 39 North, Range 13 East of the Third Principal Meridian, in Cook County, Illinois.

Property of Cook County Clark's Office