RECORDING REQUESTED BY AND WHEN RECORDED MAIL TO:

Bank of America, N.A. Gateway Village - 900 Building NC1-026-06-06 900 W. Trade Street Charlotte, NC 28255

THIS DOCUMENT PREPARED BY:
Melinda M. Sweat
Assistant Vice President
Bank of America, N.A
Gateway Village - 900 Building
NC1-026-06-06
900 W. Trade Street
Charlotte, NC 28255



Doc# 2409609022 Fee \$88.00
ILRHSP FEE:\$18.00 RPRF FEE:\$1.00
BLANKET FEE:\$75.00

KAREN A. YARBROUGH

COOK COUNTY CLERK'S OFFICE

DATE: 4/5/2024 3:07 PM

PAGE: 1 OF 6

Space above for Recorder's Use

SUBORDINATION ACREEMENT - LEASE

This Agreement is made as of Januar 30, 2024, by and among Carolina Therapeutic Services, Inc. ("Lessee") and 4519-4535 W Diversey Ave LLC ("Lessor") in favor of Bank of America, N.A. ("Bank").

Factual Background

- A. Lessor and Lessee have entered into a lease agreement dated as of January 30, 2024 ("Lease"), covering certain premises located at 4517-4535 W Diverse, Ave, Chicago, IL 60639 ("Property"). The Property is more particularly described in <u>Exhibit A</u> attached herein.
- B. Bank is the mortgagee under a Mortgage, Assignment of Rents, Scienty Agreement and Fixture Filing ("Mortgage"), dated as of January 30, 2024, which Mortgage will be recorded concurrently herewith in the Official Records of Cook County, Illinois, encumbering the Property. The Mortgage secures certain obligations to Bank as more particularly described therein (the "Secured Obligations").
- C. It is a condition to Bank's extending the Secured Obligations that the lien of the Mortgage shall at all times be senior and prior to the interest of Lessee under the Lease.

Agreement

Therefore, Lessor and Lessee agree for the benefit of Bank as follows:

1. The lien of the Mortgage, and any renewals, extensions, modifications and supplements thereto, shall unconditionally be and remain at all times a lien or charge on the Property

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prior and superior to the Lease, to the leasehold estate created thereby, and to all rights and privileges of Lessee thereunder.

- 2. The Bank would not extend the Secured Obligations without this Subordination Agreement.
- 3. Lessee consents to and approves of all provisions of the Secured Obligations and the Mortgage, as the same may be amended from time to time.
- 4. Lessee intentionally and unconditionally waives, relinquishes and subordinates its interests under the Lease in favor of the lien of the Mortgage and understands that in reliance upon, and in consideration of, this waiver, relinquishment and subordination, a specific loan or other credit accommodation will be made and, as part and parcel thereof, specific monetary and other obligations are being and will be or tered into which would not be made or entered into but for said reliance upon this waiver, relinquishment and subordination.

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

LESSEE:
Carolina Therapeutic Services, Inc.
By: Clarence Sutton, President
LESSOR:
4519-4535 W Diversey Ave LLC
By: Clarence Sutton, Member/Manager
By: Corey Sutton/Member/Manager

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LESSEE;
ACKNOWLEDGMENT
North Carolina
STATE OF-ILLINOIS CRU)
COUNTY OF Gaston) SS.
This instrument was acknowledged before me on Flbruary 19, 2024 by Clarence Sutton as Member (date)
Clarence Sutton as Member (date)
of 4519-4535 W. Diversey Ave (C). (name of pany on behalf of whom the instrument was executed)
(name of perc, on behalf of whom the instrument was executed)
Notary Public (Seal)
Ox
CHRISTINA R WITTMAN
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Notary Public. North Carolina Gaston County My Commission Expires May 04. 2026
May 04. 2026
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LESSOR:
ACKNOWLEDGMENT
North Carolina
STATE OF ILLINOIS (CO.)
COUNTY OF MC (la la) SS.
This instrument was acknowledged before me on Vincery by
Clarence Sutton as Member (date)
of US (name/s of person/s) (type of authority, e.g., officer, trustee, etc)
(name of party on behalf of whom the instrument was executed)
Notary Public
(Seal)
IN COLIC STATE
COUNTY LINE ACKNOWLEDGMENT
COUNTY ANOWLEDGMENT
STATE OF ILLINOIS ZUG)
COUNTY OF Meillen Burg
This instrument was acknowledged before me on \(\lambda \tau \tau \lambda \lambda \lambda \lambda \tau \tau \tau \tau \tau \tau \tau \ta
Corey Surton as New Ber (date)
of \(\(\sigma \) (type of authority, e.g., officer, trustee, etc)
(name of party on behalf of whom the instrument was executed)
(Seal) Notary Public Notary Public
(Seal) Notary Public Notary Public Notary Public
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(Seal) Notary Public Notary Public Notary Public Notary Public Notary Public Notary Public
COUNTINE

Ref #: 1003971187 ; - 4519-4535 W Diversey Ave LLC Subordination Lease (IL)

EXHIBIT A

LOTS 7 THROUGH 14 IN ALBERT O. ANDERSON'S RESUBDIVISION OF BLOCK 2 IN S.S. HAYES KELVYN GROVE ADDITION TO CHICAGO, A SUBDIVISION OF THE SOUTHWEST 1/4 OF SECTION 27, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Street Address of Property

4517-4535 W Diversey Ave, Chicago, IL 60639

PIN: 13-27-302-0000 PIN: 13-27-302-008-0000 PIN: 13-27-302-009-0000 PIN: 13-27-302-010-0000 PIN: 13-27-302-011-0000

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UNOFFICIAL COPY

AFFIDAVIT FOR CLERK'S LABELING OF SIGNATURES AS COPIES

REQUEST TO RECORD PHOTOCOPIED DOCUMENTS PURSUANT TO §55 ILCS 5/3-5013

Clennie Hernandez, bei	ng duly sworn, state that I have access to the copies of the attached
(print name above)	
document(s), for which I am listing the	ne type(s) of document(s) below:
Subordination Agreement - Le	
	(print document types on the above line)
which were originally executed by the	e following parties whose names are listed below:
Carolina Therapoutic Services	s, Inc. 4519-4535 W Diversey Ave LLC
(print name(s) of executor/grain	ntor) (print name(s) of executor/grantee)
for which my relationship to the docu	ument(s) is/are as follows: (example - Title Company, Agent, Attorney, etc.)
Title Company	t your relationship to the document(s) on the above line)
(prin	tyou, relationship to the document(s) on the above line)
	ATH RECAPDING ORIGINAL
state under oath that the original of th	is document is n/w LOST or NOT IN POSSESSION of the party seeking to
•	the best of my know edge, the original document was NOT INTENTIONALLY
destroyed, or in any manner <u>DISPOSE</u>	ED OF for the purpose of introducing this photo to be recorded in place of
original version of this document. Final	ly, I, the Affiant, swear I have personal knowledge that the foregoing oath
statement contained therein is both tru	e and accurate.
Clum Hunary	E 4/4/24
Affiant's Signature Above	Date Affidovit Executed/Signed
THE BELOW SECTION IS TO BE COMPLET	TED BY THE NOTARY THIS AFFIDAVIT WAS SUBSCRIBE) AN) SWORN TO BEFORE
i. h. h. 600	222
Date Document Subscribed & Sworn Before I	OFFICIAL SEAL
	DEMETRIUS ALEXANDER COLE NOTARY PUBLIC, STATE OF ILLINOIS NOTARY PUBLIC, STATE OF ILLINOIS
))(a)	MY COMMISSION EXPIRES 2/15/2026
Signature of Notary Public	
	l

SPECIAL NOTE: This is a courtesy form from the Cook County Clerk's Office, and while a similar affidavit is necessary for photocopied documents, you may use your own document so long as it includes substantially the same information as included in the above document. Additionally, any customer seeking to record a facsimile or other photographic or photostatic copy of a signature of parties who had executed such a document has the option to include this Affidavit in the recording, at their own expense if such expense is incurred, as an "EXHIBIT" and NOT the coverpage. However, this affidavit is NOT required to be recorded, only presented to the Clerk's Office as the necessary proof required before the recorder may record such a document. Finally, the recorded document WILL be stamped/labeled as a copy by the Clerk's Office prior to its recording.