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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

Doc#. 2415718041 Fee: \$107.00 CEDRIC GILES COOK COUNTY CLERK'S OFFICE Date 6/5/2024 11:59 AM Pg: 1 of 4

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141				
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com				
C. SEND ACKNOWLEDGMENT TO: (Narrie and Address)	38881 - NBT Bank			
Lien Solutions P.O. Box 29071	99187919			
Glendale, CA 91209-9071	ILIL			
	FIXTURE			
Filc with Cook, IL				
4. DEDTOD'S NAME. Provide only 113.5 Stor name (15 or 1)	A Commanda and the Commanda and a second			

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. ORGANIZATION'S NAME				
1b. INDIVIDUAL'S SURNAME Accoh	FIRST PERSONAL NAME Pascal	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2429 Lake St	Evanston		60201	USA
	Tenar Per al Austr	Langue	NAME OF THE OWNER OWNER OF THE OWNER	Lousew
2b. INDIVIDUAL'S SURNAME	FIRST PERS JNA , NAME	ADDITIONAL NAME(S)/INITIAL(S		SUFFIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIG	NOR SECURED PARTY): Provide only one Securi	ec Party name (3a or 3l	p)	
3a. ORGANIZATION'S NAME NBT Bank, NA		6		
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	(ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
	СІТУ	\$1.\1E	POSTAL CODE	COUNTRY
MAILING ADDRESS				

5. Check only if applicable and check or	<u>nly</u> one box: Collateral is	rust (see UCC1Ad, item 17 an	d Instructions) 🗌	being administered by a De	pedent's Personal Representative
6a. Check only if applicable and check	only one box:			6b. Check only if applicable	e and check <u>only</u> one box:
Public-Finance Transaction	Manufactured-Home Transaction	A Debtor is a Transn	nitting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if ap	plicable): Lessee/Lessor	Consignee/Consignor	Seller/Buyer	r Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATE	TA: 269 SPECIALTY LENDING				

incentives that are payable as a result of installing the Solar Equipment except for such rebates and incentives which have been assigned to your Installer; all your rights, title, interests, and remedies under all agreements, books, records, statements and documentation and other general intangibles relating to the Collateral (including, without limitation, the Installment Agreement), all consideration received from the operation, collection, sale or other disposition of any property that constitutes Collateral, including any payment received from any insurer arising from any loss, damage or destruction of any Collateral and any other payment received as a result of possessing all or any portion of the Collateral all supporting obligations; and all products and proceeds of and all accessions to, substitutions and replacements for and rents, profits and products of, each of the foregoing and proceeds of any

insurance, indemnity, warranty or guaranty payable to you from time to time with respect to any of the foregoing.

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UCC FINANCING STATEMENT ADDENDUM

FOLLOWINSTRUCTIONS					
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Fir	-				
because Individual Debtor name did not fit, check here [9a. ORGANIZATION'S NAME	_				
OR 96. INDIVIDUAL'S SURNAME					
Accoh					
FIRST PERSONAL NAME Pascal					
ADDITIONAL NAME(SVINITIAL S)	SUF	EIV			
ADDITIONAL NAME (O) INTEREST	301		VE SDACI	E IS FOR FILING OFFI	TE LIGE ONLY
10. DEBTOR'S NAME: Provide (10a or 10o) only one ad	ditional Dobter name or Dobter name that d				
do not omit, modify, or abbreviate any part of the Pepier's			Financing a	natement (Form OCCT) (use	e exact, full flame
10a. ORGANIZATION'S NAME					
OR 10b. INDIVIDUAL'S SURNAME	O)r				
NEW PROPERTY OF THE PROPERTY O	<u> </u>				
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
	4				
10c. MAILING ADDRESS	ату		STATE	POSTAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME	ASSIGNOR SECURED PA	TTY'S NAME: Provide or	nly <u>one</u> nam	ne (11a or 11b)	•
11a. ORGANIZATION'S NAME		7x.			
OR AND INDIVIDUAL IS SUBMANTE	L SIDOT DEDOCULA		Laborate		Laureny
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL I	NAME	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
11c, MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
		Cy	7		
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		-	7	I	
			9,		
				(<u>)</u> ~	
				'()	
				9	
13. This FINANCING STATEMENT is to be filed [for rec	ord] (or recorded) in the 14. This FINANCI	NG STATEMENT:			
REAL ESTATE RECORDS (if applicable)	covers tim	ber to be cut 🔲 covers a	s-extracted	collateral X is filed as a	a fixture filing
 Name and address of a RECORD OWNER of real estat (if Debtor does not have a record interest); 					
Pascal Accoh	Parcel ID	•			
2429 Lake St	10-13-30	7-019-0000			
Evanston, IL 60201		A 1 1 0 400			00004
213/10/01/1, 12 00201	Floperty Address: 2429 Eake St, Evaliston, It 00201				. 60201
	County: (State		
		el: 10-13-307-0			
		1/2 L1-L3 HOF	-MANS	S RESUBD SW	/1/4 SW
		741N R13E			
	<u> </u>	for Real Estate]			
17. MISCELLANEOUS: 99187919-IL-31 38881 - NBT Bank (Fi	dures) NBT Bank, NA	File with: Cook, IL	269 SPE	CIALTY LENDING	

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Debtor: Accoh, Pascal

Exi.

Description of real esta.

Municipality: EVANSTON
Subdivision: HOFFMANS

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Schedule A PASCAL ACCOH 2429 Lake Street Evanston, IL 60201

THE FOLLOWING DESCRIBED REAL ESTATE SITUATED IN THE CITY OF EVANSTON, COUNTY OF COOK, IN THE STATE OF ILLINOIS, TO WIT:

THE WEST 1/2 OF LOTS 1, 2 AND 3 IN HOFFMAN'S RESUBDIVISION OF BLOCK 3 IN FOWLER AND MCDANIELS SUBDIVISION OF THE SOUTHWEST 1/4 OF THE THW. RD PRINC.

JBJECT TO: COVEN, UBLIC AND UTILITY EA.

APN: 10-13-307-019-(C0) SOUTHWEST 1/4 OF SECTION 13, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.