

# UNOFFICIAL COPY

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COVER PAGE FOR

UCC FINANCING STATEMENT

5/5 236ST 84304287K

Property Address: 844 S. Humphrey Ave Oak Park, IL 60304  
PIN # 16-17-131-012-0000

Legal Description:

LOT 13 IN BLOCK 2 IN H. W. AUSTIN'S SUBDIVISION OF BLOCKS 2 AND 3 OF JAMES B. HOBBS' SUBDIVISION OF PART OF THE SOUTHEAST 1/4 OF THE NORTHWEST 1/4 OF SECTION 17, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

**Prepared by:**

Wyszynski Law PC  
2860 S. River Rd., Suite 220  
Des Plaines, IL 60018

**Return to:**

Polish & Slavic FCU  
100 McGuinness Blvd.  
Brooklyn, NY 11222

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RECEIVED

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

IL SECRETARY OF STATE

UNIFORM COMMERCIAL CODE

06/25/2024 11:48 AM

\$20.00 Electronic

**30837622****FS**

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) Waldemar Wyszynski, Esq. 8475305300	
B. E-MAIL CONTACT AT SUBMITTER (optional) wyszynskilaw@yahoo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Polish & Slavic FCU 100 McGuinness Blvd. Brooklyn, NY 11222	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor 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, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME 844 Humphrey, LLC			
OR	1b. INDIVIDUAL'S SURNAME		
	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 1111 Peale Ave.		CITY Park Ridge	STATE IL
		POSTAL CODE 60068	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (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 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME			
OR	2b. INDIVIDUAL'S SURNAME		
	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE
		POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME Polish & Slavic Federal Credit Union			
OR	3b. INDIVIDUAL'S SURNAME		
	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 100 McGuinness Blvd.		CITY Brooklyn	STATE NY
		POSTAL CODE 11222	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

All personal property of the Debtor respecting that certain parcel of land and the structures and improvements no or hereunder thereon located as more particularly described in Legal Description below (the "Property"), together with (i) all rights now or hereafter existing, belonging or pertaining thereto; (ii) all goods, furniture, machinery, equipment, fixtures, accounts including accounts receivable, contracts, rights, documents instruments, proceeds of insurance, rental lease agreements, general intangibles and other items of personal property of the Debtor or in which it has an interest, now owned or hereafter acquired, that are located on or used in connection with the Property and any substitutions, replacements, accessions and proceeds of any of the foregoing; (iii) all judgments, awards, of damages and settlements hereafter made as result or in relating to the Property, or the use or occupancy thereof together with any extensions or renewals thereof; and (iv) all contracts, permits and licenses respecting the use, operation or maintenance of the Property.

In addition, the word "Collateral" also includes all the following, whether now owned or hereafter acquired, whether now existing or hereafter arising, and wherever located:

A. All accessions, attachments, accessories, tools, parts, supplies, replacements of and additions to any of the

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:

Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:

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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

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9a. ORGANIZATION'S NAME  
844 Humphrey, LLC

OR 9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

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10. DEBTOR'S NAME: Provide (10a or 10b) only 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 Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR 10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11.  ADDITIONAL SECURED PARTY'S NAME or  ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR 11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

collateral described herein, whether added now or later.

B. All products and produce of any of the property described in this Collateral section.

C. All accounts, general intangibles, instruments, rents, monies, payments, and all other rights, arising out of a sale, lease, consignment, or other disposition of any of the property described in this Collateral section.

D. All proceeds (including insurance proceeds) from the sale, destruction, loss, or other disposition of any of the property described in this Collateral section, and sums due from a third party who has damaged or destroyed the Collateral of from that party's insurer, whether due to judgement, settlement or other process.

13.  This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

covers timber to be cut  covers as-extracted collateral  is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

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PIN # 16-17-131-012-0000

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17. MISCELLANEOUS:

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Collateral (continued from Item12):

E. All records and data relating to any of the property described in this Collateral section, whether in the form of a writing, photograph, microfilm, microfiche, or electronic media, together with all of Grantor's right, title, and interest in and to all computer software required to utilize, create, maintain, and process any such records or data on electronic media.

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Property of Cook County Clerk's Office