

**INFORMATION REQUEST**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

STATE OF ILLINOIS  
LAKE COUNTY  
FILED FOR RECORD  
2005 APR 13 AM 10:53  
MICHAEL A. BROWN  
REG. CLERK

A. NAME & PHONE OF CONTACT (optional) FILING OFFICE ACCT# 2005 000306  
 Kim  
 B. RETURN TO: (Name and Address)  
 Meridian Title  
 746 E. Lincoln Hwy  
 Schererville, IN 46375

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

**1. DEBTOR NAME to be searched - insert only one debtor name (1a or 1b) - do not abbreviate or combine names**

1a. ORGANIZATION'S NAME  
 Exel Logistics  
 OR  
 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

**2. INFORMATION OPTIONS relating to UCC filings and other notices on file in the filing office that include as a Debtor name the name identified in item 1:**

2a. SEARCH RESPONSE  CERTIFIED (Optional)  
 Select one of the following two options:  ALL (Check this box to request a response that is complete, including filings that have lapsed.)  UNLAPSED  
 2b. COPY REQUEST  CERTIFIED (Optional)  
 Select one of the following two options:  ALL  UNLAPSED  
 2c. SPECIFIED COPIES ONLY  CERTIFIED (Optional)

Record Number	Date Record Filed (if required)	Type of Record and Additional Identifying Information (if required)
		Nothing on file

**3. ADDITIONAL SERVICES:**

**4. DELIVERY INSTRUCTIONS (request will be completed and mailed to the address shown in item B unless otherwise instructed here):**

4a.  Pick Up  
 4b.  Other

Specify desired method here (if available from this office); provide delivery information (e.g., delivery service's name, addressee's account # with delivery service, addressee's phone #, etc.)

*Shue - 4-12-05*