

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
 CSC 1-800-858-5294

B. E-MAIL CONTACT AT FILER (optional)
 SPRFiling@csGLOBAL.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

2171 74635
 CSC
 801 Adlai Stevenson Drive
 Springfield, IL 62703

Filed in: Indiana (Lake)

GINA PIMENTEL
 RECORDER
2021-057285

STATE OF INDIANA
 LAKE COUNTY
 FILED FOR RECORD

1:35 PM 2021 Aug 31

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

OR 1b. INDIVIDUAL'S SURNAME: COLLINS

FIRST PERSONAL NAME: VYE

ADDITIONAL NAME(S)/INITIAL(S): M

SUFFIX:

1c. MAILING ADDRESS: 3924 Robinhood Lane

CITY: HAMMOND

STATE: IN

POSTAL CODE: 46323

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: Foundation Finance Company LLC

OR 3b. INDIVIDUAL'S SURNAME:

FIRST PERSONAL NAME:

ADDITIONAL NAME(S)/INITIAL(S):

SUFFIX:

3c. MAILING ADDRESS: 10101 Market Street Suite B100

CITY: Rothschild

STATE: WI

POSTAL CODE: 54474

COUNTRY: USA

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

WINDOWS INSTALLED ON PROPERTY
 VYE M COLLINS
 3924 Robinhood Lane,
 HAMMOND, IN 46323

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 Agricultural Lien Non-UCC Filing

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

8. OPTIONAL FILER REFERENCE DATA: :70075733 / 60296159

CL# 2097243

2171 74635

1525100

NOT AN OFFICIAL DOCUMENT

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

OR

9b. INDIVIDUAL'S SURNAME

COLLINS

FIRST PERSONAL NAME

VYE

ADDITIONAL NAME(S)/INITIAL(S)

M

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

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):

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

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

VYE M COLLINS
ROY COLLINS
3924 Robinhood Lane,
HAMMOND, IN 46323

14. This FINANCING STATEMENT:

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

16. Description of real estate:

PLEASE SEE ATTACHED EXHIBIT A FOR FULL LEGAL DESCRIPTION
APN: 45-07-10-482-014.000-023
Munic/Township: NORTH TWP
County: LAKE, IN

17. MISCELLANEOUS:

NOT AN OFFICIAL DOCUMENT

EXHIBIT A

LOT 39, RESUBDIVISION OF LOTS 30 TO 139, INCLUSIVE OAKCREST MANOR ADDITION, CITY OF HAMMOND, AS SHOWN IN PLAT BOOK 34, PAGE 49, LAKE COUNTY, INDIANA.

SUBJECT TO EASEMENTS, RESTRICTIONS, COVENANTS, RIGHTS-OF-WAY AND ALL OTHER MATTERS OF PUBLIC RECORD.

Property of Lake County Recorder