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PG #: 3
RECORDED AS PRESENTED

RECORDER

usign Envelope ID: E40F1370-DDE7-405C-A625-1D22FA8CE372					
UCC FINANCING STATEMENT					
FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)					
B. É-MAIL CONTACT AT SUBMITTER (optional)					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
The series of th	_ I				
Indecomm Holdings Inc.	1				
1427 Energy Park Drive					
St Paul , MN 55108					
SEE BELOW FOR SECURED PARTY CONTACT INFORMA	<u>-</u>	THE ADDRESS OF A	or 10 ==		
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full				R FILING OFFICE USE O	
name will not ft in line 1b, leave all of item 1 blank, check here and provide	the Individual Debtor informs	tion in item 10 of the Fi	nancing St	atement Addendum (Form UC	CC1Ad)
1a. ORGANIZATION'S NAME					
Broadway Express & More Inc. OR 15. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDETO	NAL NAME(S)/INITIAL(S)	SUFFIX
18. HOVIDORE & GOTOWN	FIRST PERSONAL RAME		ADDITIO	NAL NAME(S)INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
9532 S. Kolmar Avenue	Oak Lawn		IL	60453	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2s or 2b) (use exact, full	name; do not omit, modify, or	r abbreviate any part of	the Debtor	's name); if any part of the inc	dividual Debtor's
name will not fit in line 2b, leave all of item 2 blank, check here and provide 2s, ORGANIZATIONS NAME	the Individual Debtor Informa	Son in Item 10 of the Fi	nancing St	atement Addendum (Form UC	CO1Ad)
1					
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFF.X
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
A DECUMEN DARRING WATER					
 SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURD). ORGANIZATION'S NAME 	JRED PART*): Provide only	one Secured Party nam	e (3a or 3b	0	
Silver Hill Funding, LLC	7/)	.0			
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	SUFFIX	
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	OOL IN TOTAL
4425 Ponce de Leon Blvd., 5th Floor	Coral Gables		FL	33146	USA
COLLATERAL: This financing statement covers the following collateral:		<u> </u>	1	301.10	504
All inventory, equipment, accounts (including but not limited	411 b14 t	10			
but not limited to all promissory notes), letter-of-credit rights					

All inventory, equipment, accounts (including but not limited to all health-care-insurance receivables), chattel paper, instruments (including but not limited to all promisory notes), letter-of-credit rights, letters of credit, documents, depoid in accounts, invention accounts, or property, money, other rights to payment and performance, and general intengibles (including but not limited to all software and all payment intengibles); all intensity of the property of the prop

5. Check galv if applicable and check galy one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	being administered by a Decedent's Personal Representative
6a. Check <u>only</u> Yapplicable and check <u>only</u> one box:	6b. Check anly 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): Lessee/Lessor Consignes/Consignor Selle:/Buy	rar Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	
Fixture filing to be recorded at County level	

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NAME OF FIRST DEBTOR: Same as line 1s or 1s on Financing Statescause Individual Debtor name did not fit, check here	tement; if line 1b was left blank	7			
9a. ORGANIZATION'S NAME		-1			
Broadway Express & More Inc.		4			
96. INDIVIDUAL'S SURNAME		_			
SIREY REMEAUN WALE					
THE TELESCOPE OF THE TE					
ADDITIONAL NAVIE(8)/INITIAL(8)	surfix	1			
DEBTOR'S NAME: Provide (10s or 10b) only one additional Debto	name or Debtor name that did not fit	in line 15 or 25 of ti	e Financing	Statement (Form LCCs)	CE USE ONLY
do not omit, mocify, or abbreviate any part of the Debtor's name) and er 10a. ORGANIZATION'S NAME	oter the mailing address in line 10c				
10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
ADDITIONAL SECURED PARTY'S NAME OF AS	SSIGNOR SECURED PARTY	"S NAME: Provid	e only one na	me (11a or 11b)	
11a. ORGANIZATION'S NAME					
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADD TIO	NAL NAME(S)/INITIAL(S) SUFFIX
MAILING ADDRESS	СПУ	×	STATE	POSTAL CODE	COUNTRY
DDITIONAL SPACE FOR ITEM 4 (Collateral):		1		<u> </u>	
		A			
		16)_		
			C		
			0	4	
This FINANCING STATEMENT is to be filed [for record] (or recorded REAL ESTATE RECORDS (if applicable)		MENT:		()/	
eme and address of a RECORD OWNER of real estate described in item Debtor does not have a record interest:	16 16. Description of real estate		s-except (preneral [A] is nied as	s a nxture nung
	CAMPIC A.				
	S. ORGANZATION'S NAME PROVIDUAL'S SURVANE PRIST PERSONS, INME ADDITIONAL NAME(B)*MIT(AL(B)) DEBTOR'S NAME: Provide (Tie for 100) only one additions Debtor do not one, mock, or abbreviate any particifies bottor's name) and at 10x ORGANZATION'S NAME NOW/DUAL'S RIFERS PERSONAL NAME(B)*NITIAL(B) MAILING ADDRESS MAILING ADDRESS DOTTONAL SPACE FOR ITEM 4 (Collistered):	So ORGANEZATION'S NAME Broadway Express & More Inc. PRINT PERSONAL NAME ADDITIONAL NAME(@PRINTALS) DESTORYS NAME: Provide(Top is 100 only one accidence Debtor name or Deter runns that did not fix on motify, or shorewest by part of the Debtor's name) and entor the mailing address in line 10c. TOP ORGANIZATION NAME NOW, DUAL'S PRIST PERSONAL NAME NOW, DUAL'S PRIST PERSONAL NAME NOW, DUAL'S ADDITIONAL NAME(SYNTHAL(S)) ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY TO ORGANIZATION'S NAME PRET PERSONAL NAME PRET PERSONAL NAME NAME OR ORGANIZATION'S NAME OTY ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY TO ORGANIZATION'S NAME ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY TO ORGANIZATION'S NAME ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY TO ORGANIZATION'S NAME ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY TO ORGANIZATION'S NAME ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY TO ORGANIZATION'S NAME ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY TO PROVIDE STATEMENT IS TO BE SAME for record (or recorded) in the SECURED PARTY THE PRANCING STATEMENT IS TO BE SAME for record (or recorded) in the SECURED PARTY THE PRANCING STATEMENT IS TO BE SAME for record (or recorded) in the SECURED PARTY TO RECORD THE RECORD OF THE PARTY OF THE RECORD OF THE PARTY	S. ORGAWENTON NAME Broadway Express & More Inc. THE ABO THE RESCAUL NAME ADDITIONAL INVESTMENT (a) only one addedone Destor name or Detter name that did not it in the 16 or 35 of 5 on so and, modify, or abbreviate they pair of the Destor's name) and enter the mailing address in line 100. THE ABO THE AB	S. ORGANZATIONS NAME Broadway Express & More Inc. Et. INDIVIDUALS SURNAME PRIST PERSONAL NAME ADDITIONAL NAME(SPIRITIAL(S)) THE ABOVE SPACE DEBTOR'S NAME: Provide (Tig. or (30) only gas editional Debtor name or Debtor name that did not fill in the 19 or 20 of the Fluencing 1 on not cent, modify, or interview they pietred the Debtor's name) and entire the mailing address in line 100 100. INDIVIDUAL'S SURNAME NOMIDIAL'S FIRST PERSONAL NAME NOMIDIAL'S FIRST PERSONAL NAME ROMIDIAL'S SURNAME ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only gas in 1st or GRANZATIONS NAME INDIVIDUAL'S SURNAME ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only gas in 1st or GRANZATIONS NAME ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only gas in 1st or GRANZATIONS NAME ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only gas in 1st or GRANZATIONS NAME ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only gas in 1st or GRANZATIONS NAME ADDITIONAL SPACE FOR ITEM 4 (Collisioners): The PRANCING STATEMENT is to be field the record; (or recorded) in 1st in 1st or	S. ORGANZATIONS NAME Broadway Express & More Inc. Et. INDIVIDUALS SURVAME FIRST PERSONAL NAME ADDITIONAL INVESTIGATION OF SURVAME ADDITIONAL NAME (Provide (Tag or 100) only one addedone Deater name or Determinate that did not fit in the 1s or 2b of the Prisanchy Statement (From UCC1) to not continued that did not fit in the 1s or 2b of the Prisanchy Statement (From UCC1) to not continued that did not fit in the 1s or 2b of the Prisanchy Statement (From UCC1) to not continued that did not fit in the 1s or 2b of the Prisanchy Statement (From UCC1) to not continued that did not fit in the 1s or 2b of the Prisanchy Statement (From UCC1) THE ABOVE SPACE IS FOR FILING OFFI ADDITIONAL SURVAME NOW/OUT STATEMENT NAME ROW/OUT STATEMENT NAME (S) NAME (S) ADDITIONAL SECURED PARTY'S NAME (C) ADDITIONAL SECURED PARTY

97201-3411

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Lots 3 to 10, both inclusive in Block 18, in South Hammond Subdivision, in the City of Hammond, as per plat thereof, recorded in Plat Book 2, page 38, in the Office of the Recorder of Lake County, Indiana, except the East 7 feet thereof taken for widening of Calumet Avenue, and also excepting therefrom that part of Lot 10 described as follows: Beginning on the South line of said South 89 degrees 49 minutes 01 second West 2.134 meters (7.00 feet) from the Southeast corner of said Lot, which Point of Beginning is where the West Boundary of U.S.R. 41 (Calumet Avenue) meets the North Boundary of 169th Street (Pine Street); thence South 89 degrees 49 minutes 01 second West 4.808 meters (15.78 feet) along the South line of said Lot; thence North 46 degrees 29 minutes 49 seconds East 6.682 meters (21.92 feet) to the West Boundary of said U.S.R 41; thence South 0 degrees 29 minutes 01 second West 4.585 meters (15.04 feet) along the Boundary of said U.S.R. 41 to the Point of Beainnina.

Commonly known as 6836-50 Calumet Avenue, Hammond, IN 46324

The property address and tax parcel identification number listed are provided solely for informational purposes. without warranty as to accuracy or completeness and are not hereby insured.

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Legal Description IN-24-69034-03/50