



## **UCC FINANCING STATEMENT**

**FOLLOW INSTRUCTIONS** 

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141	
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolt	erskluwer.com
d. SEND ACKNOWLEDGMENT TO: (Name and Address)	23974 - SOLARCITY
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	51372636
	NVNV
	FIXTURE
File with: Douglas, NV	

DOUGLAS COUNTY, NV Rec:\$92.00

Rec:\$92.00 Total:\$92.00 2015-873251 11/25/2015 01:47 PM

CT LIEN SOLUTIONS

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KAREN ELLISON, RECORDER

THE ABOVE SPACE	EIS FOR FILING	OFFICE USE ONLY

	EBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of item 1 blank, check here and provide the				794		
	1a. ORGANIZATION'S NAME		\				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		AL NAME(S)/INITIAL(S)	SUFFIX		
	Torres	Mike					
1c. N	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
77	3 LASSEN WAY	GARDNERVILLE	NV	89410	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 TORRES R	FIRST PERSONAL NAME NEISE	ADDITIONAL NAME(S)/iNITIAL(S)		SUFFIX		
2c. l	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
77	3 LASSEN WAY	GARDNERVILLE	NV	89410	USA		
3. S	ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	RED PARTY): Provide only one Secured Party name	e (3a or 3b	)			
	39. ORGANIZATION'S NAME SOLARCITY CORPORATION	/ /			•		
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX		
3c. l	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
30	55 CLEARVIEW WAY	SAN MATEO	CA	94402	USA:		
	the same of the sa						

Hill effergy generation systems and associated con	nponents at any time p	lovided by Solal City	corporation to Debtor. The	secured Farty is not taking
security interest in the real property (except solely	to the extent the forego	oing is a fixture). The	Secured Party's only secu	rity interest is in the specific
collateral described in this section.	The state of the s			
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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:			6b. Check only if applicabl	e and check only one box;	
Public-Finance Transaction	Manufactured-Home Transacti	on A Debtor is a Trans	mitting Utility	Agricultural Lien	☐ Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if a	pplicable): Lessee/Lessor	Consignee/Consignor	Seller/Buye	er 🔀 Bailee/Bailor	Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA: 51372636 JB-894575-00 Torres, Mike 0792 Reno						
	OD-00-1070 00 TOTICS, WIRE	<del></del>				

## **UCC FINANCING STATEMENT ADDENDUM**

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line because Individual Debtor name did not fit, check here   9a. ORGANIZATION'S NAME  OR  9b. INDIVIDUAL'S SURNAME  TORICS  FIRST PERSONAL NAME  Mike  ADDITIONAL NAME(S)/INITIAL(S)	ne 1b was left blank	THE ABOVE	SPACE	IS FOR FILING OFFI	CE USE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or do not omit, modify, or abbreviate any part of the Debtor's name) and enter the modern of the Debtor's name.		ne 1b or 2b of the Fi	nancing S	tatement (Form UCC1) (use	e exact, full name;
10a. ORGANIZATION'S NAME	alling address in line roc		$\overline{}$		-
OR - INDIVIDUALIS SURNAMS		· \	1		
10b. INDIVIDUAL'S SURNAME		)			
INDIVIDUAL'S FIRST PERSONAL NAME			/		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		-/-/	,		SUFFIX
INDIVIDUAL S ADDITIONAL NAME(S)IMITIAL(S)		Y /			JOHNA
10c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
44 The restriction of OUDED DADDIES was a second	OB SECURED DARTING N	ALIE D. II.		(44 441)	
11. ADDITIONAL SECURED PARTY'S NAME OF ASSIGNATION ASSIGNATION NAME	OR SECURED PARTY'S N	AME: Provide only	one nam	e (11a or 11b)	<del> </del>
OR 445 INDIVIDUAL S CURNAME					
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	1	ADDITIO	NAL NAME(S)INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
	<u> </u>				
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)	e 14. This FINANCING STATE  covers timber to be c	_	wtrastad	collateral X is filed as a	- fixture filing
15. Name and address of a RECORD OWNER of real estate described in item 16	<del></del>		extracted	collateral	a inxture illing
(if Debtor does not have a record interest):  Mike Torres					^_
773 LASSEN WAY	A PARCEL OF				
GARDNERVILLE, NV 89410	INV CONNIT OF DOUGLAS WITH ASILUS				
	NV 89460-8147 H007 CURRENTLY OWNED BY TORRES MICHAEL & TORRES NEISER HAVING A				
	TAX ASSESSOR NUMBER OF 1220-22-110-044 AND BEING THE SAME PROPERTY MORE FULLY				
	AND BEING 11		-KOF	CKIY MORE	FULLY
17. MISCELLANEOUS: 51372636-NV-5 23974 - SOLARCITY SOLA	<u> </u>	File with: Douglas, NV	JB-89	4575-00 Torres, Mike 0792 R	eno

**Debtor:** Torres, Mike

## **Exhibit for Real Estate**

16. Description of real estate:

Continued

DESCRIBED AS G'VILLE RANCHOS #5 41 AND DESCRIBED IN DOCUMENT NUMBER 850094 DATED 09/25/2014 AND RECORDED 09/30/2014.

