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**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

KAREN ELLISON, RECORDER

|   |                                 |
|---|---------------------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional)<br>Phone: (800) 331-3282 Fax: (818) 662-4141   |                                 |
| B. E-MAIL CONTACT AT FILER (optional)<br>CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com |                                 |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) 23974 - SOLARCITY                               |                                 |
| CT Lien Solutions<br>P.O. Box 29071<br>Glendale, CA 91209-9071                                | 58821407<br><br>NVNV<br>FIXTURE |
| File with: Douglas, NV  |                                 |

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<br>Smith |                                    |                |                      |
|  | FIRST PERSONAL NAME<br>Dennis     | ADDITIONAL NAME(S)/INITIAL(S)<br>W | SUFFIX         |                      |
| 1c. MAILING ADDRESS<br>1948 PINENUT RD |                                   | CITY<br>GARDNERVILLE               | STATE<br>NV    | POSTAL CODE<br>89410 |
|  |                                   |                                    | COUNTRY<br>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<br>SOLARCITY CORPORATION |                          |                               |                |                      |
| OR   | 3b. INDIVIDUAL'S SURNAME |                               |                |                      |
|  | FIRST PERSONAL NAME      | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX         |                      |
| 3c. MAILING ADDRESS<br>3055 CLEARVIEW WAY        |                          | CITY<br>SAN MATEO             | STATE<br>CA    | POSTAL CODE<br>94402 |
|  |                          |                               | COUNTRY<br>USA |                      |

4. COLLATERAL: This financing statement covers the following collateral:  
All energy generation systems and associated components at any time provided by SolarCity Corporation to Debtor. The Secured Party is not taking a security interest in the real property (except solely to the extent the foregoing is a fixture). The Secured Party's only security interest is in the specific collateral described in this section.

|  |  |
|--|--|
| 5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative                |  |
| 6a. Check <u>only</u> if applicable and check <u>only</u> one box:<br><input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility                       |  |
| 6b. Check <u>only</u> if applicable and check <u>only</u> one box:<br><input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing   |  |
| 7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input checked="" type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licenser |  |
| 8. OPTIONAL FILER REFERENCE DATA:<br>58821407 JB-894653-00 DENNIS SMITH 0832 Reno Sparks   |  |

# 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      |        |
| Smith                         |        |
| FIRST PERSONAL NAME           |        |
| Dennis                        |        |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| W                             |        |

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)

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):

Dennis W Smith  
1948 PINENUT RD  
GARDNERVILLE, NV 89410

16. Description of real estate:

A PARCEL OF LAND LOCATED IN THE STATE OF NV, COUNTY OF DOUGLAS, WITH A SITUS ADDRESS OF 1948 PINENUT RD, GARDNERVILLE NV 89410-7933 B015 CURRENTLY OWNED BY SMITH DENNIS W & SMITH MICHELLE L HAVING A TAX ASSESSOR NUMBER OF 1220-12-710-044 AND DESCRIBED IN DOCUMENT NUMBER [ See Exhibit for Real Estate ]

**Debtor:** Smith, Dennis, W

**Exhibit for Real Estate**

**16. Description of real estate:** Continued

601-3013 DATED 05/09/2001 AND RECORDED  
06/13/2001 .

