		DOUGLAS Rec:\$92.00		20	19-930624
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		FIRST COI	RPORATE	SOLUTIONS INC) .
		KAREN EL	LISON, RI	ECORDER	
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS APN: 1420-2	28-110-022				
A NAME & PHONE OF CONTACT AT FILER (optional) ONLINE DEPT 888-507-4593				\ \	
B. E-MAIL CONTACT AT FILER (optional)				\ \	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				\ \	
FIRST CORPORATE SOLUTIONS INC 914 S STREET	. 기				\
SACRAMENTO CA 95811			-		
<u>UC</u> C1-404271 DOUGL	AS COUN <u>T</u>	THE ABOVE SPA	ACE IS FOR	FILING OFFICE US	E ONLY
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exname will not fit in line 1b, leave all of item 1 blank, check here and		ibbreviate any part o	f the Debtor's r	name); if any part of the	Individual Debtor's
1a. ORGANIZATION'S NAME					
OR 16. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	1	ADDITIONA	L NAME(S)/INITIAL(S)	SUFFIX
QUANDT 1c. MAILING ADDRESS	ELIZABETH	/-	STATE P	OSTAL CODE	COUNTRY
2991 DEL RIO LN	MINDEN		NV 8	39423	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use ex name will not fit in line 2b, leave all of item 2 blank, check here	act, full name; do not omit, modify, or a provide the individual Debtor informatio				
2a. ORGANIZATION'S NAME					
OR a supplied to a supplied to		/ /	Tabbirious	* MANUTON VINUE (AL 70)	In ICEN
26. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME DARYL		ADDITIONA	L NAME(\$)/INITIAL(\$)	SUFFIX
QUANDT 2c. MAILING ADDRESS	CITY	_	STATE P	OSTAL CODE	COUNTRY
2991 DEL RIO LN	MINDEN		NV 8	39423	USA
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNO 38. ORGANIZATION'S NAME	R SECURED PARTY): Provide only or	<u>le</u> Secured Party nar	ne (3a or 3b)		
TECHNOLOGY CREDIT UNION	\	\			
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONA	L NAME(S)/INITIAL(S)	SUFFEX
3c. MAILING ADDRESS	CITY	1	STATE P	OSTAL CODE	COUNTRY
2010 N FIRST ST, STE 206	SAN JOSE		CA 9	5131	USA
4. COLLATERAL: This financing statement covers the following collateral:		·			
"ALL OF THE DEBTOR'S RIGHT, TITLE					
EQUIPMENT (IF ANY), INCLUDING BUT					
INVERTERS, CABLES AND WIRES, SUP					
EQUIPMENT, SMART METERS AND AD					
THE SECURITY INTEREST INCLUDES A	LL WARRANTIES I	SSUED WI	TH RES	PECT TO TH	Œ
REFERENCED COLLATERAL, ANY REN	EWABLE ENERGY	OR CARBO	N CER	TIFICATES (OR
CREDITS (REFERRED TO, AMONG OTH	· ·	* *			
PRODUCTION INCENTIVES ("PERFORM		• •			
BENEFITS RELATED TO INCENTIVES T	O SUPPORT RENEW	ABLE ENI	BRGY P	RODUCTION	THAT I
	a Trust (see UCC1Ad, item 17 and Inst			by a Decedent's Perso	
6a. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction	tion A Debtor is a Transmittin	_ l ,	Check <u>only</u> if an	pplicable and check <u>ont</u> al Lien Non-UC	
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor	Seller/Buyer			ensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:		<u> </u>			
[UCC1-4042711.53-OUANDT		nternational Ass	ociation of	Commercial Admir	nistrators (IACA)

	AME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; leadures Individual Debtor name did not fit, check here	if line 1b was le	ft blank			\ \	\	
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OR	9b. INDIVIDUAL'S SURNAME					_ \	\	
	QUANDT FIRST PERSONAL NAME				-		\	
	ELIZABETH				The second of the second		- N	
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX				- I	
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	do not omit, modify, or abbreviate any part of the Debtor's name) and enter the r	mailing address	in line 10c		__			
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OR	10b. INDIVIDUAL'S SURNAME	<u> </u>	_		_			-
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	INDIVIDUAL'S FIRST PERSONAL NAME				7			
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	INDIVIDUAL'S ADDITIONAL NAME(8)/INITIAL(S)		1	· /			SUFFIX	
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11.	ADDITIONAL SECURED PARTY'S NAME OF ASSIGN	I IOR SECUE	RED PARTY	S NAME: Provide	only one na	me (11a or 11h)		
!	11a. ORGANIZATION'S NAME	ONOLOGI	(LD) (III)	O TOTAL	Olay pale 14	(114 01 115)		
	/ /		. \	7		>		
OR	11b. INDIVIDUAL'S SURNAME	FIRST PERS	SONAL NAME		ADDITIO	NAL NAME(S)/INITIAL	L(S) SUFFIX	
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13. 15. N	ERGY EQUIPMENT." This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) Name and address of a RECORD OWNER of real estate described in Item 18 if Debtor does not have a record interest): ARYL QUANDT & ELIZABETH QUANDT,	14. This FIN. 16. Description PROPE	ANCING STATE ers timber to be ion of real estate	MENT: cut covers as : CATED IN	-extracted of	TY OF DO	d as a fixture filing	9 CITY
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	LLOW INSTRUCTIONS NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; in precious Individual Debtor name did not fit, check here	if line 1b was left blank		\ \	
	9a. ORGANIZATION'S NAME			\	\
OR	9b, INDIVIDUAL'S SURNAME			\	\
	QUANDT FIRST PERSONAL NAME				/
	ELIZABETH ADDITIONAL NAME(S)INITIAL(S)	SUFFIX	THE ABOVE S	PACE IS FOR FILING OF	FICE USE ONLY
10.	DEBTOR'S NAME: Provide (10s or 10b) only one additional Debtor name of do not omit, modify, or abbreviate any part of the Debtor's name) and enter the r	or Debtor name that did not fit in f			
	10a. ORGANIZATION'S NAME	///	/		
OR	10b. INDIVIDUAL'S SURNAME	//			
	INDIVIDUAL'S FIRST PERSONAL NAME	_/_/		/	
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		$\overline{}$		SUFFIX
Юс.	MAILING ADDRESS	CITY	s	TATE POSTAL CODE	COUNTRY
R	11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS	FIRST PERSONAL NAME		DDITIONAL NAME(S)/INITIAL TATE POSTAL CODE	(S) SUFFIX
	ADDITIONAL SPACE FOR ITEM 4 (Collateral):				
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	REAL ESTATE RECORDS (If applicable) tame and address of a RECORD OWNER of real estate described in item 16	covers timber to be cu	F1	racted collateral X is filed	í as a fixture filling
	if Debtor does not have a record interest):	SEE EXHIBIT A			
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Exhibit A

LOT 89, IN BLOCK B, AS SHOWN ON THE FINAL MAP # 98-045-3 OF SARATOGA SPRINGS ESTATES UNIT NO. III, A PLANNED UNIT DEVELOPMENT, RECORDED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA, ON JUNE 23, 1998, IN BOOK 698, PAGE 5063, AS DOCUMENT NO. 442616.

