

APN: 142007615002

DOUGLAS COUNTY, NV 2023-1002313

Rec:\$60.00

Total:\$60.00

11/14/2023 10:59 AM

LORI PETERS

Pgs=2

Record at the request of and when recorded return to: GoodLeap, LLC



SHAWNYNE GARREN, RECORDER

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

Form sections A, B, and C for filer contact information, including GoodLeap, LLC details.

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)

Form section 1: Debtor's Name and Mailing Address. Includes fields for Organization's Name, Individual's Surname, First Personal Name, Additional Name(s)/Initial(s), Suffix, City, State, Postal Code, and Country.

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)

Form section 2: Debtor's Name and Mailing Address. Includes fields for Organization's Name, Individual's Surname, First Personal Name, Additional Name(s)/Initial(s), Suffix, City, State, Postal Code, and Country.

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

Form section 3: Secured Party's Name and Mailing Address. Includes fields for Organization's Name, Individual's Surname, First Personal Name, Additional Name(s)/Initial(s), Suffix, City, State, Postal Code, and Country.

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

All of the debtors right, title and interest in the Photovoltaic Solar Energy Equipment or Energy Storage/Battery Equipment (If any), including but not limited to rooftop solar panels, solar roofing materials, wall mounted batteries, stand alone batteries, inverters, cables and wires, support brackets, roof mounted or ground mounted racking systems, related equipment, and additions or replacements of the same. In addition, the security interest includes all warranties issued with respect to the referenced collateral

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): [] Lessee/Lessor [] Consignee/Consignor [] Seller/Buyer [] Bailee/Bailor [] Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

Acct # 2315160273

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
	Borgman
	FIRST PERSONAL NAME
	Ariel
ADDITIONAL NAME(S)/INITIAL(S)	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)

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):

Ariel Borgman

16. Description of real estate:

County of: Douglas

Address of Real Estate: 981 Rolling Ridge Ct, Carson City, NV, 89705

APN: 142007615002

LOT:18 BLK:C SUBD:SUNRIDGE HEIGHTS II PH 2
SEC:TWN/RNG/MER:SEC 07 TWN 14N RNG 20E

17. MISCELLANEOUS: