	Record at the request of and when recorded return to: GoodLeap, LLC CC FINANCING STATEMENT LLOW INSTRUCTIONS SHAWNYNE GARREN, RECORDER THE ABOVE SPACE IS FOR FILMS OFFICE USE ONLY THE ABOVE SPACE IS FOR FILMS OFFI USE ONLY THE ABOVE SPACE IS FOR FILMS OFFI USE ONLY THE ABOVE SPACE IS FOR FILMS OFFI USE ONLY THE ABOVE SPACE IS FOR FILMS OFFI USE ONLY THE ABOVE SPACE IS FOR FILMS OFFI USE ONLY THE ABOVE SPACE IS FOR FILMS OFFI	APN: 122015410032		Rec:\$62.00 Total:\$62.00	06/02/:	2023 09:56
when recorded return to: GoodLasp, LLC CC FINANCING STATEMENT **RAME & PROPICE OF CONTACT AT FILER (optional) filings@goodleapsupport.com SPID ACRIOWLEDGMENT TO: (Name and Address) GOODLasp, LLC PO Box # 991-140 El Paso, TX 79998-1410 El Paso, TX 79998-1410	THE ABOVE SPACE IS FOR FILING OPPICE USE ONLY CONTACT AT FILER (optional) fillings@goodleapsupport.com SEMANL CONTACT AT FILER (optional) fillings@goodleapsupport.com FIRST PERSONAL NAME DO In Out of the Contact and Semanl Con				LLC	ı
GoodLeap, LLC CFINANCING STATEMENT LLOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional) Filling@goodleapsupport.Com SEMANYNE GARREN, RECORDER SHAWNYNE GARREN, RECORDER THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY Created by a good and postport of the control of the control of the fill postport of the production of the production of the fill postport of the production of the production of the fill postport of the fill postport of the production of the fill postport	GoodLeap, LLC CEFINANCING STATEMENT LLOW INSTRUCTIONS NAME 6 PHONE OF CONTACT AT FILER (epitorian) Inlings@goodleap LLC Goodleap, LLC THE ABOVE SPACE is FOR FILMG OFFICE USE ONLY THE ABOVE SPACE			#1 # g # # 1 # # # 1 1		1 5 11 7 1 2 2 (2 2)
SHAWNYNE GARREN, RECORDER SHAWNYNE GARREN, RECORDER	SHAWNYNE GARREN, RECORDER NAME & PHONE OF CONTACT AT FILER (optional) EARLI CONTACT	when recorded return to:				
E-MAIL CONTACT AT FILER (optional)	EAML CONTACT AT FILER (policional) Illings@goodleapsupport.com SEND ACKNOWLEDGMENTTO: (Name and Address) GoodLcap, LLC PO Box 4 991440 Il Pano, TX 9998-1440 Il Pano, TX 9998-1440			00,0000.125		CD.
EMAIL CONTACT AT FILER (optional) fillings@goodleapsupport.com SEND ACKNOWLEDGMENT TO: (Name and Address) Goodleap. LLC PO Box # 981440 El Paso, TX 79998-1440 El Paso, TX	EMAIL CONTACT AT FILER (optional) fillings@goodleapsupport.com SERD ACKNOWLEGMENT TO: (Name and Addross) Goodleaps LLC PO Box # 951440 El Pau, TX 79998-1440 E			SHAWNYNE	GARREN, RECORDI	EK
GoodLeaps LILC PO Book # 981440 El Paso, TX 79998-1440 DEBTOR'S NAME: Provide only gag Debtor name (1s or 18) (use exect, full name, do not gain, modify, or abteniate any pain of the Debtor's name); if any part of the Individual Debtor's name (1s or 18) (use exect, full name, do not gain, modify, or abteniate any pain of the Debtor's name); if any part of the Individual Debtor's name, if any part of the Individual Debtor'	ESIDA DCKHOWLEDGMENT TO: (Name and Address) GoodLasp, LLC PO Box 4 981440 El Paso, TX 79998-1440 DEBTOR'S NAME: Provide only gag botter name (it sor tis) base exect, but name, do not circil, modify, or abbreviate any partie of the Debtor's name); if any part of the individual Debtor name out at it in the 1b, lower all of team 1 blank, check hore and provide the briddylaid Debtor information in licen 10 of the Penning Statement Addendum, (Form UCC):A9 It a ORGANIZATION'S BAME Lindstrom	NAME & PHONE OF CONTACT AT FILER (optional)			\ \	
SEND ACKNOWLEDGMENT TO: (Name and Address) GoodLasp, LLC PO Box # 981440 El Paulo, TX 79998-1440 LET ALGOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE. THE ABOVE SPACE IS FOR FILING OFFICE. THE ABOVE SPACE IS FOR FILING OFFICE. THE ABOVE SPACE IS FOR FILING ONLY OF THE OPEN OFFICE. THE ABOVE SPACE IS FOR FILING ONLY OF THE OPEN OFFICE. THE ABOVE SPACE IS FOR FILING. ABOVE SPACE IS FOR FILING OFFICE. THE ABOVE SPACE IS FOR FILING. ADDITIONAL NAME (SMITH OFFICE USE). THE ABOVE SPACE IS FOR FILING. THE ABOVE SPAC	SEND ACKNOWLEDGMENT TO: (Name and Address) GoodLasp, LLC PO Box 9 s91440 El Paue, TX 79998-1440 LET ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS F				\ \	
GoodLcap, LLC PO Box # 981.440 El Paso, TX 79998-1440 THE ABOVE SPACE IS FOR FLING OFFICE USE ONLY DEBTOR'S NAME: Provide only one Distor name (1 sor 10) (one exact, full name do not smill, modify, or abbreviate only part of the individual Debtor information in item 10 of the Francing Statement Addendum (Form UCQ1Ad) 1a. ORGANIZATIONS NAME 1b. INDIVIDUALS SURNAME 1b. INDIVIDUALS SURNAME 1c. INDIVIDUALS SURNAME	GoodLeap, LLC PO Box # 981440 El Paso, TX 79998-1440 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR		(a)		\ \	
PO BOX # 981440 Post Paso, TX 7998-1440 Post Paso, TX 7998-1440	PO Box # 9811440 Post # 1	SEND ACKNOWLEDGMENT TO: (Name and Address	" – [\ \	
EE Paso, TX 79998-1440 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY	EL Paso, TX 79998-1440 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY		1		_ \ \	
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S NAME: Provide only age Debtor name (1s or 1s) (use exect, full name, do not smit, modily, or abbreviate any pair of the Debtor's name); if any part of the Individual Debtor's name), if any part of the Debtor's name); if any part of the Individual Debtor's name), if any part of the Debtor's name); if any part of the Individual Debtor's name), if any part of the Debtor's name); if any part of the Individual Debtor's name); i	DEBTOR'S NAME: Provide only gag Debtor name (is or 1b) (use exact, but name, do not pink, modify, or abbreviate any pain of the Debtor name); if any pain of the individual Debtor name will not lith it no it, have all of librar 1 blank, check here and provide the individual Debtor information in item 10 of the Franching Statement Addendum (Form UCC)(Ad) 1a. ORGANIZATION'S NAME 1b. NDIVIDUAL'S SURNAME 1b. NDIVIDUAL'S SURNAME 1c. Indistrom MALINA ADDRESS CITY OLOng Valley Rd Cardnerville 1c. ORGANIZATION'S NAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME PADDITIONAL NAME(SynNITIAL(S) SUFFIX USA DEBTOR'S NAME: Provide only gag Debtor name (2a or 2b) (use exact, full mame, do not only, notly, or sibbrey/site any part of the poblor's name; if any part of the individual Debtor name will not fin in the 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of life Financing Statement Addendum (Form UCC)(Ad) DEBTOR'S NAME: Provide only gag Debtor name (2a or 2b) (use exact, full mame, do not only, notly, or sibbrey/site any part of the Debtor's name; if any part of the Individual Debtor name will not fin in the 2b, leave all of item 2 blank, check here ADDITIONAL NAME(SynNITIAL(S) SUFFIX TRIST PERSONAL NAME ROBINITIONAL NAME(SyNNITIAL(S) SUFFIX SIATE POSTAL CODE COUNTRY SIATE P					
DEBTOR'S NAME: Provide only ang Debtor name (it or 1b) (use exact, full name, do not only in the not because and provide her bioliticis and provide her bioliticis in the not because of littler 1 blains, check here and provide her bioliticis and provide and provide her bioliticis and provide and provide her bioliticis and provide her bioliticis and	DEBTOR'S NAME: Provide only ago Debtor name (to or 1b) (use exact, full name, do not only mill, more) in the lock divided Debtor information in the lock in the lock three in	LI F 450, 17 / / / / 1440	,			
DEBTOR'S NAME: Provide only ago Debtor name (1 no or 1b) (use exact, full name, do not arist, mostly, or abbreviate any part of the Debtor's name; if any part of the Endividual Debtor's name, if any part of the Endividual Debtor Information is lawn 10 of the Florencing Statement Addendum (Form UCC) Add Table	DEBTOR'S NAME: Provide only one Debtor name (1s or 1b) (use exact, full name, do not not, more 1b), laver all of them 1 blank, check here in the lock/dual Debtor information in them 10 of the Phanding Statement Addendum (Form UCC) (A) To GRANAIZATION'S NAME To GRANAIZATION'S NAME LindStrom John SATE POSTAL CODE SATE POSTAL CODE COUNTRY CA P5746 COLLATERAL: This financing alsaement covers the following collaborate CA P5746 COLLATERAL: This financing alsaement covers the following collaborate CA P5746 COLLATERAL: This financing alsaement covers the following collaborate CRUCK AND COLLATERAL: This financing alsaement covers the following collaborate CRUCK AND COLLATERAL: This financing alsaement covers the following collaborate CRUCK AND COLLATERAL: This financing alsaement covers the following collaborate CRUCK AND COLLATERAL: This financing alsaement covers the following collaborate CRUCK AND COLLATERAL: This financing alsaement covers the following collaborate CRUCK AND COLLATERAL: This			THE ABOVE SPACE IS FO	R FILING OFFICE USE	ONLY
and provide the included Debort information in item 10 of the Financing Statement Addendum (Form UCC)(Ad)	Table Provide and Provide the Individual Debtor information in liter 10 of the Phenocing Statement Addendum (Form UCC) Adjusted in John Table Provide only one Debtor name (2a or 2b) (use exact, full name; do not onl), nor alterwisite any part of the Debtor name; if any part of the Individual Debtor name will not it in line 2b, leave all of item 2 blank, check here. The Individual Debtor name (2a or 2b) (use exact, full name; do not onl), more than 10 of the Pinancing Statement Addendum (Form UCC) Adjusted to 10 of the Pinancing Statement Addendum (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 lr	ndividual Debtor's
The NOINTDUAL'S SURNAME Lindstrom MALING ADDRESS OTY Gardnerville NV 89460 COUNTRY SYATE POSTAL CODE USA DEBTOR'S NAME: Provide only gag Debtor name (2a or 2b) (use exact, full name, do not only, no sibpreviate any part of the Debtor's name, if any part of the Individual Debtor's name will not fit in line 2b, teave all of them 2 blank, check here and provide the Individual Debtor information in Item 10 of line Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME DISTORTING NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX	The NOINTDUAL'S SURNAME John STATE POSTAL CODE COUNTRY	name will not fit in line 1b, leave all of item 1 blank, check here	and provide the Individual Debtor information	ion in item 10 of the Financing St	atement Addendum (Form U	CC1Ad)
Secured Party State Postal code Country State Postal code Country Conductor Country Co	The provided provided Sold	1a. ORGANIZATION'S NAME		/ /		
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not onlt, modily, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor Information in item 10 of this Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME Destroin Name Provide only one Debtor name (2a or 2b) (use exact, full name; do not onlt, modily, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor Information in item 10 of this Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME Destroin Name Provide only one Debtor Information in item 10 of this Financing Statement Addendum (Form UCC1Ad) Destroin Name Provide only one Debtor Information in item 10 of this Financing Statement Addendum (Form UCC1Ad) Destroin Name Provide only one Debtor Information in item 10 of this Financing Statement Addendum (Form UCC1Ad) Destroin Name Provide only one Debtor Information in item 10 of this Financing Statement Addendum (Form UCC1Ad) Destroin Name Provide Only one Debtor Information in item 10 of this Financing Statement Addendum (Form UCC1Ad) Destroin Name Provide Only one Debtor Information in item 10 of this Financing Statement Addendum (Form UCC1Ad) Destroin Name Provide Only one Debtor Information in item 10 of the Debtor Information in item 10 of the Individual Debtor Information	DEBTOR'S NAME: Provide only gag Debtor name (2a or 2b) (use exact, full name; do not onlit, modify, or abbreviate any part of the Debtor's name); if any part of the Debtor's name, if any part of the Debtor's	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name, do not onlit, medify, 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 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbrevirate sary part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 2b, leave all of Item 2 Diank, check here	·				
DEBTOR'S NAME: Provide only gag Debtor name (2a or 2b) (use exact, full name, do not), modify, or abbreviate any part of the Debtor's name; if any part of the Individual Debtor's name; if any part of the Debtor's name; if any part of the Debtor's name; if any part of the Individual Debtor's name; if any part of the Individual Debtor's name; if any part of the Individual Debtor's name; if any part of the Debto	DEBTOR'S NAME: Provide only map Debtor name (2a or 2b) (use exact, full name; do not onlift, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not if in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor Information in fem 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME					I
Page	PIRST PERSONAL NAME ADDITIONAL NAME(S)INTITIAL(S) SUFFIX					
Za. ORGANIZATION'S NAME Za. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX	Za. ORGANIZATION'S NAME Zb. INDIVIDUAL'S SURNAME	DEBTOR'S NAME: Provide only one Debtor name (2a or 3 name will not fit in line 2b, leave all of item 2 blank, check here	≥b) (use exact, full name; do not omit, modify, or Image and provide the Individual Debtor informa	abbreviate any part of the Debtor tion in item 10 of the Financing S	r's name); it any part of the li latement Addendum (Form U	ndividual Debtors ICC1Ad)
Lindstrom Kelly CTTY STATE POSTAL CODE USA SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY'S Provide only one Secured Party name (3a or 3b)	Lindstrom Kelly STATE POSTAL CODE COUNTRY USA					<u>.</u>
Lindstrom Kelly CTTY STATE POSTAL CODE USA SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY'S Provide only one Secured Party name (3a or 3b)	Lindstrom Kelly STATE POSTAL CODE COUNTRY USA					
MAILING ADDRESS OD Long Valley Rd CITY Gardnerville 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 GOODLap, LLC 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)(INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY USA 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 Check and if applicable and check and one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and Instructions) being administered by a Decodent's Personal Representative in the Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filling	MAILING ADDRESS ON LONG VAILEY RAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) Sa. ORGANIZATION'S NAME GOODLEAP, LLC 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY USA COLLATERAL: This financing statement covers the following collaterat: 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 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 Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Liem Non-UCC Filing ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Ballee/Bailor Licensee/Locnsor OPTIONAL FILER REFERENCE DATA:		The state of the s	ADDITIO	INAL NAME(S)/INITIAL(S)	SUFFIX
SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY): Provide only gong Secured Party name (3a or 3b) Sa. ORGANIZATION'S NAME GOODLeap, LLC 3b. INDIVIDUAL'S SURNAME MAILING ADDRESS STATE MAILING ADDRESS Total Postal Code COUNTRY USA Roseville 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 Check goly if applicable and check goly one box: Check goly if applicable and check goly one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filling	SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) Sa. ORGANIZATION'S NAME GOODLEAP, LLC	/	7. 7.	STATE	POSTAL CODE	
Sa. ORGANIZATION'S NAME GOODLeap, LLC 3b. INDIVIDUAL'S SURNAME MAILING ADDRESS CITY Roseville CA 95746 COUNTRY USA 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 Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and Instructions) Check only if applicable and check only one box: Check only if applicable and check only one box: Check only if applicable and check only one box: Apricultural Lien Non-UCC Filing	Sa. ROGANIZATION'S NAME GOODLeap, LLC	00 Long Valley Rd	Gardnerville	NV	89460	USA
GoodLeap, LLC 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX MAILING ADDRESS 8781 Sierra College Boulevard 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 Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, liter 17 and instructions) being administered by a Decodent's Personal Representative and Check only if applicable and check only one box: (b) Check only if applicable and check only one box: (b) Check only if applicable and check only one box: (c) ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY USA COUNTRY STATE POSTAL CODE COUNTRY USA STATE POSTAL CODE CA 95746 USA STATE POSTAL CODE CA 95746 USA Check only if applicable and check only one box: (c) ADDITIONAL NAME(S)/INITIAL(S) STATE POSTAL CODE COUNTRY USA STATE POSTAL CODE CA 95746 USA STATE POSTAL CODE COUNTRY STATE POSTAL CODE CA 95746 USA STATE POSTAL CODE CA 95746 USA	GoodLeap, LLC 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SyINITIAL(S) STATE POSTAL CODE COUNTRY USA 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 Check only if applicable and check only one box: Check only if applicable		ASSIGNOR SECURED PARTY): Provide only	one Secured Party name (3a or 3	b)	
MAILING ADDRESS MAILIN	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 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 in Check only if applicable and check only one box: 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 in Check only if applicable and check only one box: 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 in Check only if applicable and check only one box: Check only if applicable and check only one box: Check only if applicable and check only one box: Check only if applicable and check only if applicable and check only one box: Alternative Designation (if applicable): Consignee/Consignor Consignee/Consignor Soller/Buyer Ballee/Ballor Licensee/Licensor		\			
Roseville CA 95746 USA **ROSEVILLATERAL: 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 **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 in the proposition of the policies and check only one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filling Agricultural Lien Non-UCC Filling Non-UCC Fill	Roseville CA 95746 CA 95746 USA 8781 Sierra College Boulevard 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 Check golly 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 Representation. Check golly if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filling ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor Consignee/Consignor Consignor Consignee/Consignor Consignee/Consignor Consignee/Consignor Consignee/Consignor Consignee/Consignor Consignee/Consignor Consignee/Consignor Consignee/Consignor Consigne		FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Roseville CA 95746 USA **ROSEVILLATERAL: 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 **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 in the proposition of the policies and check only one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filling Agricultural Lien Non-UCC Filling Non-UCC Fill	Roseville CA 95746 CA 95746 USA 8781 Sierra College Boulevard 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 Check golly 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 Representation. Check golly if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filling ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor Consignee/Consignor Consignor Consignee/Consignor Consignee/Consignor Consignee/Consignor Consignee/Consignor Consignee/Consignor Consignee/Consignor Consignee/Consignor Consignee/Consignor Consigne				-1	
Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and instructions) Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction 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 Check only if applicable and check only one box: Being administered by a Decedent's Personal Representative and Check only if applicable and check only one box: A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filling	Check only if applicable and check only one box: Check only if applicable and check only one box: Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction Manufactured-Home Transaction Manufactured-Home Transaction OPTIONAL FILER REFERENCE DATA:		/	/	1	
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 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 and 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	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 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 Representation. A Check only if applicable and check only one box: General public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filling ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Ballee/Ballor Licensee/Licensor			CA	95/46	<u> </u>
Public-Finance Transaction Manufactured-Home Transaction A Debtor Is a Transmitting Utility Agricultural Lien Non-UCC Filing	ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor OPTIONAL FILER REFERENCE DATA: 6b. Check only if applicable and check only one box: 6b. Check only if applicable and check only one box: 6b. Check only if applicable and check only one box: 6c. Check only if applicable and check only one box: Apricultural Lien Non-UCC Filing Seller/Buyer Bailee/Bailor Licensee/Licensor	All of the debtors right, title and interest Equipment (If any), including but not I stand alone batteries, inverters, cables a related equipment, and additions or rep	st in the Photovoltaic Solar En imited to rooftop solar panels, and wires, support brackets, ro lacements of the same. In add	solar roofing materia of mounted or groun	als, wall mounted a mounted a mounted racking	batteries, g systems,
1. 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	ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Description Consignee/Consignor Description Consignee/Consignor Consignor Consignee/Consignor Consignor C					
Public-Finance Transaction Manufactured-Home Transaction A Debtor Is a Transmitting Utility Agricultural Lien Non-UCC Filing	Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor OPTIONAL FILER REFERENCE DATA:		held in a Trust (see UCC1Ad, item 17 and l			
	ALTERNATIVE DESIGNATION (If applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor OPTIONAL FILER REFERENCE DATA:		me Transaction A Debtor is a Transm	i —		
CONTRACTOR SERVICION (IN SERVICION)	OPTIONAL FILER REFERENCE DATA:					

2023-997050

DOUGLAS COUNTY, NV

	LOW INSTRUCTIONS		1		\ \	
	AME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statemer ecause Individual Debtor name did not fit, check here	nt; if line 1b was left blank			\ \	
_	9a. ORGANIZATION'S NAME				\ \	
ŀ					\ \	
R	9b. INDIVIDUAL'S SURNAME			-		\
١	Lindstrom		-			\
1	FIRST PERSONAL NAME		-	The state of the s		/
	John					1
	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABO	E SPACE	S FOR FILING OFFI	CE USE ONLY
).	DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor nam do not omit, modify, or abbreviate any part of the Debtor's name) and enter the	ne or Debtor name that did not fit in he mailing address in line 10c	n line 1b or 2b of th	e Financing S	tatement (Form ÚCC1)	(use exact, full nam
	10a. ORGANIZATION'S NAME	///				
R	10b. INDIVIDUAL'S SURNAME					
	INDIVIDUAL'S FIRST PERSONAL NAME					
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
IC.	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
١. ا	ADDITIONAL SECURED PARTY'S NAME of ASSI	GNOR SECURED PARTY	"S NAME: Provid	de only <u>one</u> na	ame (11a or 11b)	
	11a. ORGANIZATION'S NAME					
R	11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	DNAL NAME(S)/INITIAL(S) SUFFIX
c.	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
2.	ADDITIONAL SPACE FOR ITEM 4 (Collateral):			· · · ·	· ·	
p ^{oli}						
J		_//				
-						
3.	This FINANCING STATEMENT is to be filed [for record] (or recorded) in REAL ESTATE RECORDS (if applicable)	the 14. This FINANCING STAT	_	as-extracted	collateral X is filed	as a fixture filing
	Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	16. Description of real esta	te:			,
Jo	hn Lindstrom and Kelly Lindstrom	County of: DO	UGLAS			
١,,		Address of Real Estate: ^{800 I}	Long Valley Rd,	Gardnervill	e, NV, 89460	
		APN: 122	015410032	2		