



13424507
 10/13/2020 12:41:00 PM \$40.00
 Book - 11037 Pg - 2868-2870
 RASHELLE HOBBS
 Recorder, Salt Lake County, UT
 FIRST CORPORATE SOLUTIONS INC
 BY: eCASH, DEPUTY - EF 3 P.

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

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	
SACRAMENTO CA 95811	
UCC1-546594	Salt Lake County, UT

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		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
NELSON		JACOB		
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
10458 S COLUMBINE CIR		SANDY	UT	84094-6157
				COUNTRY
				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
NELSON		SAMANTHA		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
10458 S COLUMBINE CIR		SANDY	UT	84094-6157
				COUNTRY
				USA

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				
OR				
Digital Federal Credit Union				
3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
220 Donald Lynch Blvd.		Marlborough	MA	01752
				COUNTRY
				USA

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

The collateral includes solar panels, inverters, racking systems, wiring, electrical and mechanical connections, metering, monitoring and/or other distributed generation interconnect equipment ("Solar Equipment") installed at the address of the Debtor set forth above and financed by the Secured Party.

The collateral further includes all accessions, attachments, accessories, tools, parts, supplies, replacements of and additions to any of the Solar Equipment; all proceeds from warranty claims related to the Solar Equipment; all rebates and incentives that are payable as a result of installing the Solar Equipment; all your rights, title, interests, and remedies under all agreements, statements and other documentation relating to the Solar Equipment; and all consideration received from the collection, sale or other disposition of the Solar Equipment, including any payment received from any insurer arising from any loss, damage or destruction of the Solar Equipment and any

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

6b. Check only if applicable and check only one box: Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:

UCC1-546594 3885855-NELSON

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	
NELSON	
FIRST PERSONAL NAME	
JACOB	
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):

other payment received as a result of possessing the Solar Equipment, or any other proceeds of the Solar Equipment.

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):

16. Description of real estate:
 COMMONLY KNOWN AS 10458 SOUTH COLUMBINE CIR, SANDY UT 84094
 APN 28-17-276-015-0000
 For title reference deed recorded 08/27/2020 with the Salt Lake County Recorder, in Book 11007 Page 5022, Instrument No. 13375559.
 LEGAL DESCRIPTION: See Exhibit A

17. MISCELLANEOUS:

Exhibit A

**LOT 21, WHITE CITY NO. 32 SUBDIVISION, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE
AND OF RECORD IN THE OFFICE OF THE SALT LAKE COUNTY RECORDER, STATE OF UTAH.**