ME & PHONE OF CONTACT AT FILER (opinal) ALL CONTACT AT FILER (optional) Aggegoodleapsupport.com AD ACKNOWLEDGMENT TO: (Name and GoodLeap, LLC PO Box # 981440		7		13719226 07/15/2021 03:47 PM \$40.0 8ook - 11207 Pg - 2092-2093 RASHELLE HOBBS			
ngs@goodleapsupport.com ID ACKNOWLEDGMENT TO: (Name and GoodLeap, LLC			RECORDER, SALT LAKE COUNTY, U				
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		THE A	BOVE SPACE IS FO	R FILING OFFICE USE	ONLY		
TOR'S NAME: Provide only one Debtor name	(1a or 1b) (use exact, fu	ll name; do not omit, modify, or abbrevia	te any part of the Debto	r's name); if any part of the Ir	ndıvıdual Debtor		
will not lit in line 1b, leave all of item 1 blank, che	eck here and provide	the Individual Debtor information in iter	n 10 of the Financing Si	atement Addendum (Form U	CC1Ad)		
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INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
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ING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY		
748 W Dry Peak Drive		Herriman	UT	84096	USA		
NDIVIDUAL'S SURNAME	-	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
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3	WILL NOT IT IN LINE 15, leave all of item 1 blank, che DRGANIZATION'S NAME NDIVIDUAL'S SURNAME ING ADDRESS W Dry Peak Drive TOR'S NAME Provide only one Debtor name will not fit in line 2b, leave all of item 2 blank, che DRGANIZATION'S NAME	INDIVIDUAL'S SURNAME NDIVIDUAL'S SURNAME ING ADDRESS W Dry Peak Drive TOR'S NAME Provide only one Debtor name (2a or 2b) (use exact, full will not fit in line 2b, leave all of item 2 blank, check here and provide and provide and provide will not fit in line 2b, leave all of item 2 blank, check here and provide and provide will not fit in line 2b, leave all of item 2 blank, check here and provide and provide will not fit in line 2b, leave all of item 2 blank, check here and provide and provide and provide will not fit in line 2b, leave all of item 2 blank, check here and provide and p	TOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item or	TOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debto 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 St ORGANIZATION'S NAME NDIVIDUAL'S SURNAME NDIVIDUAL'S SURNAME NDIVIDUAL'S SURNAME NDIVIDUAL'S SURNAME NDIVIDUAL'S SURNAME NOITION STATE W Dry Peak Drive TOR'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 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 St	NDIVIDUAL'S SURNAME NDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) RIC Kim CITY Herriman CITY BY A096 TOR'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 Irancing Statement Addendum (Form U		

UCC FINANCING STATEMENT ADDENDUM

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NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing S because Individual Debtor name did not fil, check here	Statement, if line 1b was le	ft blank				
9a. ORGANIZATION'S NAME						
	<u> </u>					
86 INDIVIDUAL'S SURNAME						
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DEBTOR'S NAME Provide (10a or 10b) only one additional Deb do not omit, modify, or abbreviate any part of the Debtor's name) and	otor name or Debtor name	that did not fit in	line 1b or 2b of the Fin	ancing S	tatement (Form UCC1) (use	exact, full nam
10a ORGANIZATION'S NAME	enter the mailing address					
10b. INDIVIDUAL'S SURNAME		<u> </u>	-			
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
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☐ ADDITIONAL SECURED PARTY'S NAME Qt ☐ 118. ORGANIZATION'S NAME	ASSIGNOR SECUR	EDPARIY	S NAME: Provide on	ly <u>one</u> na	me (11a or 11b)	·
11b INDIVIDUAL'S SURNAME	FIRST PERS	ONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
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