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U	CC FINAN	ICING S	TATEM	ENT
FC	DLLOW INSTRU	JCTIONS		

FOLLOW INSTRUCTIONS						
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-	13910163 B: 11316 P: 3526 Total Pages: 3 03/14/2022 09:04 AM By: ggasca Fees: \$40.00					
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com	FINST-FINANCE	FINST- FINANCE STATEMENT Rashelle Hobbs, Recorder, Salt Lake County, Utah				
C. SEND ACKNOWLEDGMENT TO: (Name and Address	5) 54517 - Addition Financial	Return To: LIEN SO 330 N. BRAND BLV			. CA 91203	
Lien Solutions P.O. Box 29071	Lien Solutions 85375567				,	
Glendale, CA 91209-9071						
1	UTUT FIXTURE <sub>I</sub>					
File with: Salt Lake, UT		THE ABOVE SPA	CE IS F	OR FILING OFFICE US	SE ONLY	
1. DEBTOR'S NAME: Provide only one Debtor name (1a or				**		
name will not fit in line 1b, leave all of item 1 blank, check here  1a. ORGANIZATION'S NAME	and provide the Individual Debt	or information in item 10 of the Fir	nancing Sta	atement Addendum (Form U	JCC1Ad)	
Ia. ONGANIZATIONS IVAME						
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	
Aguayo	Patricia					
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
4432 Adonis Dr	Salt Lake C	ity	UT	84124	USA	
2. DEBTOR'S NAME: Provide only one Debtor name (2a or				,, • ,		
name will not fit in line 2b, leave all of item 2 blank, check here	and provide the Individual Debt	or information in item 10 of the Fir	nancing Sta	atement Addendum (Form U	JCC1Ad)	
2a. ORGANIZATION'S NAME						
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONA	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		
2c. MAILING ADDRESS	Zc. MAILING ADDRESS CITY		STATE	POSTAL CODE	COUNTRY	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of	f ASSIGNOR SECURED PARTY): Pro	ovide only <u>one</u> Secured Party nan	ne (3a or 3	b)		
3a. ORGANIZATION'S NAME						
Addition Financial Credit Union	r		1		1	
GR 3b. INDIVIDUAL'S SURNAME	FIRST PERSON/	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
1000 Primera Blvd.	Lake Mary		FL	32746	USA	
4. COLLATERAL: This financing statement covers the following Solar Panels	g collateral:					

5. Check only if applicable and check only or	ne box: Collateral isheld in a Trus	st (see UCC1Ad, item 17 and	Instructions)	being administered by a Dec	edent's Personal Representative	
6a. Check only if applicable and check only	one box:			6b. Check only if applicable	and check <u>only</u> one box:	
Public-Finance Transaction	Manufactured-Home Transaction	A Debtor is a Transmi	itting Utility	Agricultural Lien	Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applica	ble): Lessee/Lessor	Consignee/Consignor	Seller/Buye	r Bailee/Bailor	Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA:						
85375567 Ag	guayo7919					

## **UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS		•			
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement because Individual Debtor name did not fit, check here	; if line 1b was left blank				
9a. ORGANIZATION'S NAME		ł			
		1			
OR 9b. INDIVIDUAL'S SURNAME		1			
Aguayo					
FIRST PERSONAL NAME					
Patricia					
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX				
				IS FOR FILING OFF	
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name and		line 1b or 2b of the Fina	ancing S	tatement (Form UCC1) (u	se exact, full name;
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the 10a. ORGANIZATION'S NAME	ne mailing address in line 100				
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
	GNOR SECURED PARTY'S I	NAME: Provide only <u>c</u>	<u>ne</u> nam	e (11a or 11b)	
11a. ORGANIZATION'S NAME					
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
The movies of the mile	THE TERESTAL WINE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TO LE TO MINE (S)	0011111
11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):					
· ·					
57	La Tir Envisione et I	-145.17			
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in REAL ESTATE RECORDS (if applicable)	I —				5.1 51
15. Name and address of a RECORD OWNER of real estate described in item	covers timber to be 16. Description of real estat		dracted	collateral 🔼 is filed as	a fixture filing
(if Debtor does not have a record interest):	Parcel ID:	е.			
Manuel I. Rodriquez-Davalos and Patricia	22-01-178-004-0000				
Aguayo	22-01-170-00-	r-0000			
4432 ADONIS DR	1.0T 1402 MT		шп	I C NIO 14	
SALT LAKE CITY, UT 84124	LOT 1402, MT				DEOE
	ACCORDING				
	ON FILE AND				AKE
	COUNTY REC				A 1.45
	Property Addre	ess: 4432 A[	JON	IS DR SALT L	.AKE
		al Estate 1			
	[ See Exhibit for Rea	al Estate ]			

Debtor: Aguayo, Patricia

Exhibit for Real Estate

**16. Description of real estate:** Continued

CITY UT 84124 Salt Lake Parcel ID: 22-01-178-004-0000