	Record at the request of when recorded return to GoodLeap, LLC
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS A NAME & PHONE OF CONTACT AT FILER (C	
B E-MAIL CONTACT AT FILER (optiona') filings@goodleapsupport.com	
filings@goodleapsupport.com	d Address)
filings@goodleapsupport.com	d Address)

4 COLLATERAL This financing statement covers the following collateral

07/13/2023 12:52 PM By: csummers Fees: \$40.00 Rashelle Hobbs,Recorder, Salt Lake County, Utah Return To: GOODLEAP, LLC PO BOX 981440EL PASO, TX 799981440	
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1 DEBTOR'S NAME Provide only one Debtor name (1a or	1b) (use exact full name, do not omit, morlify, or abbreviate	any part of the Debto	or's name), if any part of the	edividual Debt
name will not fit in line 1b, leave all of item 1 blank, check her	e and provide the Individual Debtor information in item	10 of the Financing S	tatement Addendum (Form U	CC1Ad)
1a ORGANIZATION'S NAME			 	
OR 15 INDIVIDUAL'S SURNAME				
- · · · · · · · · · · · · · · · · · · ·	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		SUFFIX
SHEPHERD	JOHN			
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2992 S 7930 W	MAGNA	UT	84044	USA
26 INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX
			2(0)	
c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
				USA
SECURED PARTY'S NAME (or NAME of ASSIGNEE of	ASS'GNOR SECURED PARTY) Provide only one Secured	Party came (3a or 3t	0)	
3a ORGANIZATION'S NAME			-,	
GoodLeap, LLC				
36 INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
C MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
8781 Sierra College Boulevard	Roseville	CA	05746	USA

14128634

All of the Debtor's right, title and interest in and to Goods purchased with the proceeds of the loan by Secured Party to Debtor pursuant to the Home Improvement Agreement described in the Loan Agreement between Secured Party and Debtor(s), including (a) Siding (b) all accessions, attachments, accessories, tools, parts, supplies, replacements of and additions to such goods; (c) all proceeds from warranty claims related to such goods; (d) such Home Improvement Agreement or any operations and maintenance agreement; (e) all agreements and other documentation relating to such goods, such Home Improvement Agreement or any operations and maintenance agreement; (f) all consideration received from the collection, sale or other disposition of such goods, including any payment received from any insurer arising from any loss, damage or destruction of such goods and any other payment received as a result of possessing any such goods, or any other proceeds of such goods

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	6b 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/Bu	yer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA Acct # 2301149570	

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 9b INDIVIDUAL'S SURNAME SHEPHERD FIRST PERSONAL NAME **JOHN** 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 106 INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME IND:VIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY ADDITIONAL SECURED PARTY'S NAME OF ASSIGNOR SECURED PARTY'S NAME Provide on: y one name (11a or 11b) 11a ORGANIZAT ON'S NAME OR 11b INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c MAILING ADDRESS CITY POSTAL CODE COUNTRY 12 ADDITIONAL SPACE FOR ITEM 4 (Collateral) 13 X 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 16 Description of real estate (if Debtor does not have a record interest) County of: SALT LAKE JOHN SHEPHERD Address of Real Estate: 2992 S 7930 W, MAGNA, UT, 84044 APN: 1428155002 LOT 94. SHADOW RUN ESTATES PLAT B 5699-1462 5970-1011 6149-1186 6202-1453 7421-2166 8595-3860 8645-7891 9380-2809 9780-2144 17 MISCELLANGOUS:

UCC FINANCING STATEMENT ADDENDUM (Form UCC1Ad) (Rev. 04/20/11)