DOC ID 20240021367

UCC Page 1 of 3 Gary Christensen Washington County Recorder 07/08/2024 04:12:10 PM Fee \$40.00 By LIEN SOLUTIONS

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141			
B. E-MAIL CONTACT AT FILER (optional) ucofilingreturn@wolterskluwer.com			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	63270 - Solar Mosaic -		
Lien Solutions P.O. Box 29071	99658156		
Glendale, CA 91209-9071	UTUT		
	FIXTURE		
File with: Washington, UT			
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1)	o) (use exact, full name; do not omit,		

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. D	EBTOR'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
na	me 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 Sta	tement Addendum (Form	UCC1Ad)
ſ	1a. ORGANIZATION'S NAME				
ا ہ					
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	Hernandez	Sheila			
1c. k	AILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
10	E 520 S	IVINS	UT	84738-6235	USA
2. D	EBTOR'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
na	me 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 Sta	tement Addendum (Form	UCC1Ad)
- 1	2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
2c. MAILING ADDRESS		CITY	STATE POSTAL CODE		COUNTRY
3. S	ECURED PARTY'S NAME (or NAME of ASSIGNEE of AS	SSIGNOR SECURED PARTY): Provide only one Secure	d Party name (3a or 3	b)	•
	3a. ORGANIZATION'S NAME	· · · · · · · · · · · · · · · · · · ·			
	Solar Mosaic LLC				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. I	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
60	1 12th Street, Suite 325	Oakland	CA	94607	USA
4.0	OLL ATERAL: This financing statement covers the following or	Materal:			

The collateral includes the following, whether now owned or hereafter acquired, whether now existing or hereafter arising, and wherever located:

- 1. All solar panels, inverters, battery storage, hot water solar systems, racking systems, wiring, electrical and mechanical connections, metering, monitoring and/or other distributed generation interconnect equipment (collectively, "Solar Equipment") and home improvement products (together with the Solar Equipment, "Purchased Goods") excluding Fixtures (as defined in Article 9 of the UCC), if any (such Purchased Goods which excludes Fixtures are referred to as "Collateralized Goods");
- 2. All accessions, attachments, accessories, tools, parts, supplies, replacements of and additions to any Collateralized Goods;
- 3. All proceeds from warranty claims related to the Collateralized Goods, the home improvement agreement between the debtor and solar contractor ("Home Improvement Agreement") and, if debtor has received an operations and maintenance loan, the operations and maintenance agreement between the debtor and its operations and maintenance contractor ("Operations and Maintenance Agreement");
- 4. All rebates and incentives that are payable as a result of installing the Collateralized Goods except for such rebates and incentives which have been assigned to debtor's solar contractor or operations and maintenance contractor;

5 Alldak	ntor's rights title inl	taraete and ramadiae u	nder all agreements, statemer	nte and other document	tation relating to the (Colleteralized 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 <u>only</u> if applicable and check <u>only</u> 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/Buy	er Bailee/Bailor Licensee/Licensor
8, OPTIONAL FILER REFERENCE DATA:	
99658156 36384	72014



UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS	Л					
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statemen because Individual Debtor name did not fit, check here	t; if line 1b was left bla	ank				
98. ORGANIZATION'S NAME						
OR - INDUSTRIALIS OUTDANS						
Hernandez						
FIRST PERSONAL NAME Sheila						
ADDITIONAL NAME(S)INITIAL(S)	:	SUFFIX	THE ABOVE SF	PACE	IS FOR FILING O	FFICE USE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor nai do not omit, modify, or abbreviate any part of the Debtor's name) and enter t			or 2b of the Financ	cing Sta	tement (Form UCC1)) (use exact, full name;
10a, ORGANIZATION'S NAME						
OR 106. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S)						SUFFIX
10c. MAILING ADDRESS	CITY		ST	ATE	POSTAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME OF ASS	IGNOR SECURED	PARTY'S NAME	: Provide only <u>one</u>	name	(11a or 11b)	.
			T			
110. INDIVIDUALS SURNAME	FIRST PERSON	AL NAME	AL	DITIONA	AL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY		ST	ATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): (including, without limitation, the Home Improvement Agreeme	nt and Operations	and Maintenan	ce Agreement);	; and		
6. All consideration received from the collection, sale or other or received from any insurer arising from any loss, damage or depossessing any Collateralized Goods or any proceeds of Colla	struction of any C					
All of the collateral described above is intended to be classified classified as a fixture, this filing constitutes a fixture filing as to favor of the secured party and secured party's lien thereon con	such collateral. T	he collateral des	scribed above s			
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) REAL ESTATE RECORDS (if applicable)			_			
15. Name and address of a RECORD OWNER of real estate described in iter (if Debtor does not have a record interest):		stimber to be cut n of real estate:	Covers as-extra	acted co	ollateral 🔀 is filed	i as a fixture filing
Arnaldo A. Lugo-Rosado and Sheila T.) OF LAND
Hernandez Gomez, as joint tenants 10 E 520 S					TATE OF UNADO, PHA	
IVINS, UT 84738	ACCO	RDING TO	THE OFF	ICIA	L PLAT TH	IEREOF
		E AND OF TY RECOR			THE WASH E	HINGTON
	Propert		10 E 520		/INS UT 84	1738
17, MISCELLANEOUS; 99658156-UT-63 63270 - Solar Mosaic - ResiF	Solar Mosaic LLC		ith: Washington, UT	3638	84 72014	

Debtor: Hernandez, Sheila

Exhibit for Real Estate

16. Description of real estate: Continued

Parcel ID: I-Delc-2-42

