

W3292540

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

WA

98327

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

955 Ross Loop, Suite 100

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

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)
uccfilingreturn@wolterskluwer.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Lien Solutions
P.O. Box 29071
Glendale, CA 91209-9071

File with: Weber, UT

E# 3292540 PG 1 OF 2 Leann H. Kilts, WEBER COUNTY RECORDER 28-Jul-23 0311 PM FEE \$40.00 DEP CF REC FOR: LIEN SOLUTIONS ELECTRONICALLY RECORDED

1. E	DEBTOR'S NAME: Provide only one Debtor name (1a or	r 1b) (use exact, full name; do not omit, modify, or abbreviate	any part of the Debto	r's name); if any part of the	Individual Debtor's		
n	ame will not fit in line 1b, leave all of item 1 blank, check here	e and provide the Individual Debtor information in item	10 of the Financing Sta	atement Addendum (Form I	JCC1Ad)		
	ORGANIZATION'S NAME						
OR	1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S)						
	Blanca	Haydee	Abbino	IVAL IVANIL(O)/IIVITIAL(O)	SUFFIX		
1c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
56	615 Fox Chase Dr	Ogden	Ιυτ	84403	USA		
OR	2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUF		SUFFIX		
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX		
	Blanca	Luis					
2c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
56	615 Fox Chase Dr	Ogden	UT	84403	USA		
3. S	SECURED PARTY'S NAME (or NAME of ASSIGNEE o	of ASSIGNOR SECURED PARTY): Provide only one Secure	ed Party name (3a or 3	b)			
	3a. ORGANIZATION'S NAME Community 1st Credit Union						
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX		
3c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		

DuPont

Perfection: Purchase Money Security Interest - in Fixture. All Solar energy equipment including but not limited to the complete Solar and Energy Storage system and all of its components installed at 5615 Fox Chase Dr, Ogden, UT, 84403, 07-466-0016, ALL OF LOT 33, FOX CHASE SUBDIVISION

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 Utili	ity Agricultural Lien Non-UCC Filing					
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Selle	er/Buyer Bailee/Bailor Licensee/Licensor					
8. OPTIONAL FILER REFERENCE DATA:						
94269026 1001030						

USA

PHASE 2, SOUTH OGDEN CITY, WEBER COUNTY, UTAH., FOX CHASE SUB PH 2, 33, 5N-1W-15,

). NAME OF FIRST DEBTOR: Same as line 1a or 1b on Fi	-	ne 1b was left blank				
because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME						
98. ORGANIZATIONS NAIVIE						
9b. INDIVIDUAL'S SURNAME						
Blanca						
FIRST PERSONAL NAME						
Haydee		Lauren				
ADDITIONAL NAME(S)INITIAL(S)		SUFFIX	THE ABOVE	CDACE	E IS EOD EII ING OEEI	ICE LISE ONL
DEBTOR'S NAME: Provide (10a or 10b) only one ad	ditional Debtor name or	Debtor name that did not fit in			tatement (Form UCC1) (us	
do not omit, modify, or abbreviate any part of the Debtor's			mile 15 of 25 of the 1 ii	nunoning o	atement (Form Goot) (45	e exact, fair frame
10a. ORGANIZATION'S NAME						
10b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME/SVINITIAL (S)						SUFFIX
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
0c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
<u> </u>	or Assigno	OR SECURED PARTY'S	IAME: Provide only	one nam	e (11a or 11b)	
11a. ORGANIZATION'S NAME						
11b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S		NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):						
3. $igotimes$ This FINANCING STATEMENT is to be filed [for rec	ord] (or recorded) in the	14. This FINANCING STATE	EMENT:			
REAL ESTATE RECORDS (if applicable)		covers timber to be		extracted	collateral X is filed as	a fixture filing
 Name and address of a RECORD OWNER of real estat (if Debtor does not have a record interest): 	e described in item 16	16. Description of real estate	e:			
		07-466-0016, 7	ALL OF LO	T 33	EOX CHASE	
		SUBDIVISION				ITY
		WEBER COUN				
		33, 5N-1W-15,		., . •	,	J <u>_</u> ,
],,,				
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Community 1st Credit Union

File with: Weber, UT

17. MISCELLANEOUS: 94269026-UT-57 55580 - Community 1st CU