

Record at the request of and when recorded return to: GoodLeap, LLC

## E# 3316907 PG 1 OF 2

LEANN H KILTS, WEBER CTY. RECORDER 06-MAR-24 1041 AM FEE \$40.00 DC REC FOR: GOODLEAP

## **UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)	
B. E-MAIL CONTACT AT FILER (optional)	
filings@goodleapsupport.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
GoodLeap, LLC	71
PO Box # 981440	'
El Paso, TX 79998- 1440	
	1
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION	
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name	
name will not fit in the state of the state	ne: do not amit in

\*W3316907\*

<ol> <li>DEBTOR'S NAME: Provide only one Debtor name (1a o name will not fit in line 1b, leave all of item 1 blank, check he</li> </ol>	The state of the s	100 120 120 100 100 100 100 100 100 100	FOR FILING OFFICE USE	
1a. ORGANIZATION'S NAME	re and provide the Individual Debtor information in item 10 of the	e Financin	Statement Addendum (Form L	ndividual Debi JCC1Ad)
OR 45 HADDING				
16. INDIVIDUAL'S SURNAME HOVER	FIRST PERSONAL NAME	IADDI	FIGNIAL MANGEO	···
C. MAILING ADDRESS	ASHTON	1	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
4662 S RIDGELINE DR	CITY	STAT	E POSTAL CODE	COUNTRY
The state of the s	2b) (use exact, full name; do not omit, modify, or abbreviate any part	E UI		
O O O O O O O O O O O O O O O O O O O	and provide the Individual Debtor Information In item 10 of the	Financing	Statement Addendum (Form U	CC1Ad)
R 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		Addending (Form O	CC1Ad)
2b. INDIVIDUAL'S SURNAME WELLS	FIRST PERSONAL NAME SHAWN		Statement Addendum (Form University of Statement (Form University of Statement (Form University of Statement (Form University of Statem	SUFFIX
2b. INDIVIDUAL'S SURNAME WELLS MAILING ADDRESS	FIRST PERSONAL NAME SHAWN CITY	ADDIT	IONAL NAME(S)/INITIAL(S)  POSTAL CODE	CC1Ad)
Page 126. INDIVIDUAL'S SURNAME WELLS  MAILING ADDRESS  662 S RIDGELINE DR	FIRST PERSONAL NAME SHAWN CITY WASHINGTON TERRAC	ADDIT	IONAL NAME(S)/INITIAL(S)  POSTAL CODE	SUFFIX
2b. INDIVIDUAL'S SURNAME WELLS MAILING ADDRESS 662 S RIDGELINE DR SECURED PARTY'S NAME (or NAME of ASSIGNEE of 3a. ORGANIZATION'S NAME	FIRST PERSONAL NAME SHAWN CITY	ADDIT	IONAL NAME(S)/INITIAL(S)  POSTAL CODE	SUFFIX COUNTRY
2b. INDIVIDUAL'S SURNAME WELLS  MAILING ADDRESS 662 S RIDGELINE DR  SECURED PARTY'S NAME (or NAME of ASSIGNEE of  3a. ORGANIZATION'S NAME GOODLEAP, LLC	FIRST PERSONAL NAME SHAWN CITY WASHINGTON TERRAC	ADDIT	IONAL NAME(S)/INITIAL(S)  POSTAL CODE	SUFFIX COUNTRY
Page 1 Secured Party's Name (or name of assignee of 3a. Organization's name	FIRST PERSONAL NAME SHAWN CITY WASHINGTON TERRAC	ADDIT STATE UT me (3a or	POSTAL CODE 84405-5564	SUFFIX COUNTRY USA
2b. INDIVIDUAL'S SURNAME WELLS MAILING ADDRESS 662 S RIDGELINE DR SECURED PARTY'S NAME (or NAME of ASSIGNEE of 3a. ORGANIZATION'S NAME GOODLEAP, LLC 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME SHAWN  CITY WASHINGTON TERRAC  ASSIGNOR SECURED PARTY): Provide only one Secured Party na	ADDIT STATE UT me (3a or	IONAL NAME(S)/INITIAL(S)  POSTAL CODE	SUFFIX COUNTRY
2b. INDIVIDUAL'S SURNAME WELLS MAILING ADDRESS 662 S RIDGELINE DR SECURED PARTY'S NAME (or NAME of ASSIGNEE of 3a. ORGANIZATION'S NAME GOODLEAP, LLC	FIRST PERSONAL NAME SHAWN  CITY WASHINGTON TERRAC  ASSIGNOR SECURED PARTY): Provide only one Secured Party na	ADDIT STATE UT me (3a or	POSTAL CODE 84405-5564	SUFFIX COUNTRY USA

All of the debtors right, title and interest in the Photovoltaic Solar Energy Equipment or Energy Storage/Battery Equipment (If any), including but not limited to rooftop solar panels, solar roofing materials, wall mounted batteries, stand alone batteries, inverters, cables and wires, support brackets, roof mounted or ground mounted racking systems, related equipment, and additions or replacements of the same. In addition, the security interest includes all warranties issued with respect to the referenced collateral

Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and instructions)	
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility  7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consideration	being administered by a Decedent's Personal Representative  6b. Check only if applicable and check only one box:  Agricultural Lien Non-UCC Filing
8. OPTIONAL FILER REFERENCE DATA:  Acct # 2415179358  FILING OFFICE CORY   Loca Streets	er Bailee/Bailor Licensee/Licensor

## 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 HOVER FIRST PERSONAL NAME **ASHTON** 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 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 ADDITIONAL SECURED PARTY'S NAME OF ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY STATE 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 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) covers timber to be cut 15. Name and address of a RECORD OWNER of real estate described in item 16 covers as-extracted collateral is filed as a fixture filing 16. Description of real estate: (if Debtor does not have a record interest): County of: WEBER ASHTON HOVER and SHAWN WELLS Address: 4662 S RIDGELINE DR, WASHINGTON TERRACE, UT, { APN: 250350033 ALL OF LOT 33, BLOCK 2, PARCEL G, WASHINGTON TERRACE, WEBER COUNTY, UTAH.

FILING OFFICE COPY — UCC FINANCING STATEMENT ADDENDUM (Form UCC1Ad) (Rev. 07/01/23)

17. MISCELLANEOUS: