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RICHARD T. MAUGHAN
DAVIS COUNTY, UTAH RECORDER
8/22/2023 3:51 PM
FEE 40.00 Pgs: 7
DEP AAM REC'D FOR LIEN
SOLUTIONS

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

12-755-0044

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

nam	e will not fit in line 1b, leave all of item 1 blank, check	1e or 1b) (use exact, full name; do not omit, modify, or abbroviate there and provide the Individual Debtor information in item			
16	ORGANIZATION'S NAME				
R	INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(SYMITTAL(S)	ISUFFIX
ı	JHLAND-NOVOA	JENNIFER	, Louis	and investory	301710
c. MAI	LING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1095	WEST 275 NORTH	Clearfield	UT	84015	USA
L		<u> </u>		<u> </u>	
R L	INDIVIDUAL'S SURNAME	<u> </u>		<u> </u>	
1"	. INDIVIDUAL 3 SORIMANE	FIRST PERSONAL NAME	ADOING	NAL NAME(SYMITIAL(S)	SUFFIX
E MAI	LING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
SEC	CURED PARTY'S NAME (or NAME of ASSIGN	EE of ASSIGNOR SECURED PARTY): Provide only one Secure			COUNTRY
SEC					COUNTRY
SEC	CURED PARTY'S NAME (or NAME of ASSIGN B. ORGANIZATION'S NAME		ed Party name (3e or 3		COUNTRY
SEC	CURED PARTY'S NAME (or NAME of ASSIGN II. ORGANIZATION'S NAME Dividend Solar Finance LLC	EE of ASSIGNOR SECURED PARTY): Provide only one Secure	ed Party name (3e or 3	b)	

The collateral described below is located at the Debtors address listed above, ALL OF THE DEBTORS RIGHT TITLE AND INTEREST IN PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT (IF ANY) INCLUDING BUT NOT LIMITED TO ROOFTOP SOLAR PANELS ELECTRICAL INVERTERS CABLES AND WIRES SUPPORT BRACKETS RELATED EQUIPMENT MONITORING EQUIPMENT SMART METERS AND ADDITIONS OR REPLACEMENTS OF THE SAME. IN ADDITION THE SECURITY INTEREST INCLUDES ALL WARRANTIES ISSUED WITH RESPECT TO THE REFERENCED COLLATERAL ANY RENEWABLE ENERGY OR CARBON CERTIFICATES OR CREDITS (REFERRED TO AMONG OTHER THINGS AS SRECS) ANY RENEWABLE ENERGY PRODUCTION INCENTIVES (PERFORMANCE-BASED INCENTIVES) AND ANY OTHER ECONOMIC BENEFITS RELATED TO INCENTIVES TO SUPPORT RENEWABLE ENERGY PRODUCTION THAT BORROWER MAY RECEIVE OR BE ENTITLED TO AS A RESULT OF THE PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT. THIS SECURITY AGREEMENT DOES NOT CREATE A SECURITY INTEREST IN THE DEBTORS REAL PROPERTY TO BE RECORDED IN THE LAND RECORDS.

	and check only one box:	,		6b. Check only if applicable	cedent's Personal Represent a and check only one box:
Public-Finance Tr	ansaction Manufactured-Home Trans	action A Debtor is a Tra	nsmitting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATIVE DESIGN	ATION (if applicable): Lessee/Lessor	Consignee/Consignor	Selfer/Buy	er Bailee/Ballor	Licensee/Licensor
B. OPTIONAL FILER REFI					54,
94618418	L20-UT-0104614				

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS	Canada San Jana					
NAME OF FIRST DEBTOR; Same as time 1a or 1b on Financing Statement; if time because Individual Debtor name did not fit, check here	ne 1b was left	blank				
SE. ORGANIZATION'S NAME			1			
		-	1			
OR SE INDIVIDUAL'S SURNAME			-			
UHLAND-NOVOA						
FIRST PERSONAL NAME JENNIFER			1			
ADDITIONAL NAME(SYNITIALIS)		SUFFIX	1			
			THE ABO	VE SPACE	IS FOR FILING OFFI	ICE USE ONLY
10. DEBTOR'S NAME: Provide (10s or 10b) only one additional Debtor name or			line 1b or 2b of th	e Financing S	latement (Form UCC1) (us	e exact, full name
do not omit, modify, or abbroviate any part of the Debtor's name) and enter the ma 10a. ORGANIZATION'S NAME	alling address i	n line 10c				- 2 2
CD						
OR 106. INDIVIOUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
HIDAUDIU IS ADDITIONAL MANEGERIES						
INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S)						SUFFIX
10c, MAILING ADDRESS	CITY		2	STATE	POSTAL CODE	COUNTRY
11. ☐ ADDITIONAL SECURED PARTY'S NAME ☐ ASSIGNO	OR SECURE	D PARTY'S	NAME: Provide	nly one nam	e (11a or 11b)	
11a. ORGANIZATION'S NAME		100000000000000000000000000000000000000				- Pro-
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSO	WAL NAME		Labbrio	NAL NAME(SYNITIAL(S)	SUFFIX
		NO.E TOUR		Abomo	ar in a left had in refat	Surrix
11c. MAJLING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):						
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14. This FIN	ANCING STAT	EMENT:			
REAL ESTATE RECORDS (if applicable)	cove	rs timber to be	cut _ covers	as-extracted	collateral 🛛 is filed as a	å fixture filing
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest);	16. Descripta	on of real estat	e :			
Jennifer Uhland-Novoa, married woman	LOTA	4-A CO	NTAINED	WITH	N PARK VILL	ACE
1095 West 275 North		0.00			NDED PLANN	
CLEARFIELD, UT 84015	read lancature land after				PMENT (P.R.L	
	and the section of				ITIFIED IN TH	,,
					CORDED IN D	S-30 S - S-30 Mot.
					O. 2625773 IN	
					E DECLARAT	
		hibit for Re		- 91 F 11.5		
17. MISCELLANEOUS: 94618418-UT-11 52882 - Dividend Solar - Pro Dividen	nd Solar Finance	rrc	File with: Davis, UT	L20-UT-4	0104614	

Debtor: UHLAND-NOVOA, JENNIFER

Exhibit for Real Estate

16. Description of real estate:

Continued

COVENANTS, CONDITIONS AND RESTRICTIONS RECORDED IN DAVIS COUNTY, UTAH ON JULY 17, 2007 AS ENTRY NO. 2289215 IN BOOK 4326 AT PAGE 751, AND ANY AND ALL AMENDMENTS THERETO. TOGETHER WITH A RIGHT OF EASEMENT OF USE AND ENJOYMENT IN AND TO THE COMMON AREAS DESCRIBED AND AS PROVIDED FOR IN SAID DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS, WHICH INCLUDE, WITHOUT LIMITATION, AN EASEMENT FOR VEHICULAR INGRESS AND EGRESS OVER AND ACROSS SAID COMMON AREAS TO AND FROM SAID LOT. Property Address: 1095 West 275 North CLEARFIELD

UT 84015 Davis

Parcel ID: 12-755-0044

3541181 BK 8321 PG 794

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

B. E-MAIL CONTACT AT FILER (optional)					
uccfilingretum@wolterskluwer.com					
SEND ACKNOWLEDGMENT TO: (Name and A	ddress) 52892 - Dividend Solar -				
Lian Salutiana	0404040				
Lien Solutions P.O. Box 29071	94618418				
Glendale, CA 91209-9071	UTUT				
	FIXTURE				
	FIXTORE				
File with: Davis, UT		THE ABOVE SPACE IS F	OR FILING OFFICE U	SE ONLY	
DEBTOR'S NAME: Provide only one Debtor name	(1a or 1b) (use exact, full name; do not omit, modify, o	r abbreviate any part of the Debto	r's name); if any part of the	Individual Debt	
same will not fit in line 1b, leave all of item 1 blank, che	k here and provide the Individual Debtor Information	tion in item 10 of the Financing St	atement Addendum (Form	UCC1Ad)	
1s. ORGANIZATION'S NAME	-				
į:					
,	FIRST PERSONAL NAME	NAME ADDITIONAL NAME(SYINITIAL(S)			
1b, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	AUDITO			
16, INDIVIDUAL'S SURNAME UHLAND-NOVOA	JENNIFER	Abbilio	one to anaday and the anaday		
UHLAND-NOVOA		STATE	POSTAL CODE	COUNTRY	
UHLAND-NOVOA	JENNIFER	STATE	POSTAL CODE		
UHLAND-NOVOA : MAILING ADDRESS 1095 WEST 275 NORTH	JENNIFER CITY Clearfield	STATE	POSTAL CODE 84015	USA	
UHLAND-NOVOA MAILING ADDRESS 1095 WEST 275 NORTH DEBTOR'S NAME: Provide only one Debtor name	JENNIFER CITY Clearfield (2s or 2b) (use exact, full name; do not onlit, modify, o	STATE UT r abbreviate any part of the Debto	POSTAL CODE 84015 r's name); if any part of the	USA Individual Debt	
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The collateral described below is located at the Debtors address listed above. ALL OF THE DEBTORS RIGHT TITLE AND INTEREST IN PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT (IF ANY) INCLUDING BUT NOT LIMITED TO ROOFTOP SOLAR PANELS ELECTRICAL INVERTERS CABLES AND WIRES SUPPORT BRACKETS RELATED EQUIPMENT MONITORING EQUIPMENT SMART METERS AND ADDITIONS OR REPLACEMENTS OF THE SAME. IN ADDITION THE SECURITY INTEREST INCLUDES ALL WARRANTIES ISSUED WITH RESPECT TO THE REFERENCED COLLATERAL ANY RENEWABLE ENERGY OR CARBON CERTIFICATES OR CREDITS (REFERRED TO AMONG OTHER THINGS AS SRECS) ANY RENEWABLE ENERGY PRODUCTION INCENTIVES (PERFORMANCE-BASED INCENTIVES) AND ANY OTHER ECONOMIC BENEFITS RELATED TO INCENTIVES TO SUPPORT RENEWABLE ENERGY PRODUCTION THAT BORROWER MAY RECEIVE OR BE ENTITLED TO AS A RESULT OF THE PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT. THIS SECURITY AGREEMENT DOES NOT CREATE A SECURITY INTEREST IN THE DEBTORS REAL PROPERTY TO BE RECORDED IN THE LAND RECORDS.

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 Represer	ntative
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/Buye	r Beilee/Bailor Licensee/Licenso	ĸ
8. OPTIONAL FILER REFERENCE DATA:		
94618418 L20-UT-0104614		

3541181 BK 8321 PG 795

CC FINANCING STATEMENT LLOW INSTRUCTIONS						
NAME & PHONE OF CONTACT AT FILER (optional) ame: Wolters Kluwer Lien Solutions Phone: 800-	331-3282 Fax: 818-	662-4141				
E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com						
SEND ACKNOWLEDGMENT TO: (Name and Address	52892 Dividend	Solar				
Lien Solutions						
	LITLIT					
		E i				
File with: Davis, UT			THE ABOVE SPA	CE IS F	OR FILING OFFICE US	EONLY
16. INDIVIDUAL'S SURNAME. UHLAND-NOVOA	P332		ME	ADDITIO	NAL NAME(S)MNITVAL(S)	SUFFIX
MAILING ADDRESS	cm	Y		STATE	POSTAL CODE	COUNTRY
95 WEST 275 NORTH	CI	earfield		UT	84015	USA
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME						SUFFIX
MAILING ADDRESS	an			STATE	POSTAL CODE	COUNTRY
ECURED PARTY'S NAME (or NAME of ASSIGNEE of	ASSIGNOR SECURED I	PARTY): Provide	only one Secured Party name	e (3a or 3	b)	
32. ORGANIZATION'S NAME Dividend Solar Finance LLC						
3b. INDIVIDUAL'S SURNAME	FIR	ST PERSONAL N	AME	ADDITIO	NAL NAME(SYNITIAL(S)	SUFFIX
	ľ					1
MAILING ADDRESS	Cit	Ÿ.		STATE	POSTAL CODE	COUNTRY
MAILING ADDRESS 661 Buchanan Street OLLATERAL; This financing statement covers the following	Sa	n Francisco		STATE	POSTAL CODE 94123	COUNTRY
	NAME & PHONE OF CONTACT AT FILER (optional) Ime: Wolters Kluwer Lien Solutions Phone: 800-3 E-MAIL CONTACT AT FILER (optional) UCCfilingreturn@wolterskluwer.com SEND ACKNOWLEDGMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 File with: Davis, UT EBTOR'S NAME: Provide only one Debtor name (1a or one will not fit in line 1b, leave all of item 1 blank, check here 1a. ORGANIZATION'S NAME 1b. INDIVIDUAL'S SURNAME UHLAND-NOVOA MAILING ADDRESS 95 WEST 275 NORTH EBTOR'S NAME: Provide only one Debtor name (2a or a ame will not fit in line 2b, leave all of item 2 blank, check here 2a. ORGANIZATION'S NAME To. INDIVIDUAL'S SURNAME WAILING ADDRESS ECURED PARTY'S NAME (or NAME of ASSIGNEE of 3a. ORGANIZATION'S NAME Dividend Solar Finance LLC	NAME & PHONE OF CONTACT AT FILER (optional) Ime: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818- E-MAIL CONTACT AT FILER (optional) UCCfilingreturn@wolterskluwer.com SEND ACKNOWLEDGMENT TO: (Name and Address) 9461841 P.O. Box 29071 Glendale, CA 91209-9071 File with: Davis, UT File with: Davis, UT File with: Davis, UT EBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; ame will not fit in line 1b, leave all of item 1 blank, check here and provide the India. ORGANIZATION'S NAME 1b. INDIVIDUAL'S SURNAME UHLAND-NOVOA MAILING ADDRESS 95 WEST 275 NORTH EBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; ame will not fit in line 2b, leave all of Item 2 blank, check here and provide the India. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME The Will not fit in line 2b, leave all of Item 2 blank, check here and provide the India. ORGANIZATION'S NAME TO INDIVIDUAL'S SURNAME TO INDIVIDU	NAME & PHONE OF CONTACT AT FILER (optional) Ime: Wolters Kluwer Lien Solutions Phone; 800-331-3282 Fax: 818-662-4141 E-MAIL CONTACT AT FILER (optional) UCGIlingreturn@wolterskluwer.com SEND ACKNOWLEDGMENT TO: (Name and Address) SEND ACKNOWLEDGMENT TO: (Name and Address) P.O. Box 29071 Glendale, CA 91209-9071 UTUT FIXTURE File with: Davis, UT EBTOR'S NAME: Provide only one Debtor name (1s or 1b) (use exact, full name; do not omit, mo arms will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor in 1s. INDIVIDUAL'S SURNAME 1b. INDIVIDUAL'S SURNAME UHLAND-NOVOA JENNIFER EBTOR'S NAME: Provide only one Debtor name (2s or 2b) (use exact, full name; do not omit, mo arms will not fit in line 2b, leave all of Item 2 blank, check here and provide the Individual Debtor in 1st. Organization's name 2s. 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Organization's NAME DIVIDENTAL SURNAME DIVIDENTAL SURNAME	NAME & PHONE OF CONTACT AT FILER (optional) Imp: Wolters Klawer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 E-MAIL CONTACT AT FILER (optional) UCCfilingreturn@woltersklawer.com SEND ACKNOWLEDGMENT TO: (Name and Address) 52892 - Dividend Solar - Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 UTUT FIXTURE File with: Davis, UT THE ABOVE SPA EBTOR'S NAME: Provide only one Debtor name (1s or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of 1s or only one of the fine 1s, leave all of item 1 blank, check here and provide the Individual Debtor information in Item 10 of the Fine 1s. 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Box 29071 Glendale, CA 91209-9071 UTUT FIXTURE File with: Davis, UT THE ABOVE SPACE IS FI 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 name will not fit in line 1b, lave all of item 1 blank, check here and provide the Individual Debtor information in Item 10 of the Financing State. 1a. ORGANIZATION'S NAME The ABOVE SPACE IS FI 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 name 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 State. UHLAND-NOVOA JENNIFER CITY STATE 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 name 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 State. To INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITION ALLING ADDRESS CITY STATE ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3) (3b ORGANIZATION'S NAME) Dividend Solar Finance LLC	LOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional) mine: Wolkers Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 E-MAIL CONTACT AT FILER (optional) uccfilingrefurn@wolferskluwer.com SEND ACKNOWLEDGMENT TO: (Name and Address) 52892 - Dividend Solar - Lien Solutions P.O. Box 29071 UTUT FIXTURE File with: Davis, UT THE ABOVE SPACE IS FOR FILING OFFICE USI EBTOR'S NAME: Provide only one Debtor name (1s or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Parameter Addendum (Form UI 1s. ORGANIZATION'S NAME FIRST PERBOMA, NAME PRINTER FIRST PERBOMA, NAME ADDITIONAL NAME; Symithal(S) JENNIFER GITY Clearfield UT 84015 EBTOR'S NAME: Provide only one Debtor name (2s 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 in Individual Debtor in Item 10 of the Financing Statement Addendum (Form UI 2s. ORGANIZATION'S NAME: Provide only one Debtor name (2s 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 information in item 10 of the Financing Statement Addendum (Form UI 2s. ORGANIZATION'S NAME: PRINTIPER ADDITIONAL NAME; Symithal(S) AMALING ADDRESS GITY STATE POSTAL CODE THE POSTAL CODE THE POSTAL CODE THE POSTAL CODE THE POSTAL CODE ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY); Provide only one Secured Party name (3s or 3b) 3s. ORGANIZATION'S NAME Dividend Solar Finance LLC

	and check <u>only</u> one box: Collateral is held in	a Trust (see UCC1Ad, Item 17 a	and instructions)	Deing administered by a D	ecedent's Personal Representative
6a. Check only if applicable	and check only one box:			6b. Check only if applicab	le and check <u>only</u> one box:
☐ Public-Finance Tra	nsaction Manufactured-Home Transa	ction A Debtor is a Trans	smitting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATIVE DESIGN	ATION (if applicable): Lessee/Lessor	Consignee/Consignor	Seller/Buye	Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFE	RENCE DATA:				•
94618418	L20-UT-0104614				
		 ,	v	Prenare	d by Lien Solutions P.O. Boy 20071

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS						
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Sta	stement, if line 1b was left b	lank				
because Individual Debtor name did not fit, check here		·				
98. ORGANIZATION'S NAME						
<u> </u>						
OR 9b. INDIVIDUAL'S SURNAME						
UHLAND-NOVOA						
FIRST PERSONAL NAME						
JENNIFER						
ADDITIONAL NAME(SYNITIAL(S)		DIFFER				
ADDITIONAL ROME(S) MITTAL(S)	1	SUFFIX			with the same of t	
					IS FOR FILING OFF	AND A SECURITION OF A PARTY.
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Deb			ine 1b or 2b of the F	inancing S	tatement (Form UCC1) (u	se exact, full name;
do not omit, modify, or abbreviate any part of the Debtor's name) and 10a. ORGANIZATION'S NAME	enter the mailing address in	line 10c				
Too. One-wight from a make						
OR 106 INDIVIDUAL'S SURNAME		-				secon
No. WEIVE OVE S SUPPOSE						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL S FIRST PERSONAL ROME						
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)						Lauren
man mana a result of the state (of this trade)						SUFFIX
10c, MAILING ADDRESS	CITY	<u> </u>		STATE	POSTAL CODE	COUNTRY
				JIN.E	TOO IAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME OF	433101100 0501100			1	m Bases Statement	
11a ORGANIZATION'S NAME	ASSIGNOR SECURE	PARTYSN	AME: Provide onto	one nam	e (11a or 11b)	
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSON	NAI NAME		LADDITIO	NAL NAME(S)INITIAL(S)	ŞUFFIX
1999 - 1993 - Oran A. Mariera and an alternative services	1000000			1		1
11c. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
12 ADDITIONAL SPACE FOR ITEM A (College of):						
12, ADDITIONAL SPACE FOR ITEM 4 (Colleteral):						
13. This FINANCING STATEMENT is to be filed (for record) (or reco	A DE A TRIA FINIA	NCING STATE	MENT.		-	
REAL ESTATE RECORDS (if applicable)						
15. Name and address of a RECORD OWNER of real estate described		s timber to be c		extracted	collateral 🛛 is filed as	a fixture filing
(if Debter does not have a record interest):	in tem 16 16. Descriptio	n of real estate				
Jennifer Uhland-Novoa, married woma	m light					
1095 West 275 North	LOT 44				N PARK VILL	
	PHASE	E 1 AND	PHASE 2	AMEI	NDED PLANN	IED
CLEARFIELD, UT 84015	RESID	ENTIAL	UNIT DEV	ELOF	PMENT (P.R.I	J.D), AS
	The second secon				ITIFIED IN TH	
					CORDED IN I	
	1 (2) (2) (2) (3) (4)					
					O. 2625773 IN	
		I PAGE	182 AND	IN TE	IE DECLARA	TION OF
		CR. 14 F				
	[See Exh	ibit for Rea	Estate]			
17. MISCELLANEOUS: 94618418-UT-11 52892 - Dividend Solar - Pro	[See Exh		Estate]	L20-UT-	0104614	

Debtor: UHLAND-NOVOA, JENNIFER

Exhibit for Real Estate

16. Description of real estate:

Continued

COVENANTS, CONDITIONS AND RESTRICTIONS RECORDED IN DAVIS COUNTY, UTAH ON JULY 17, 2007 AS ENTRY NO. 2289215 IN BOOK 4326 AT PAGE 751, AND ANY AND ALL AMENDMENTS THERETO. TOGETHER WITH A RIGHT OF EASEMENT OF USE AND ENJOYMENT IN AND TO THE COMMON AREAS DESCRIBED AND AS PROVIDED FOR IN SAID DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS, WHICH INCLUDE, WITHOUT LIMITATION, AN EASEMENT FOR VEHICULAR INGRESS AND EGRESS OVER AND ACROSS SAID COMMON AREAS TO AND FROM SAID LOT.

Property Address: 1095 West 275 North CLEARFIELD

UT 84015 Davis

Parcel ID: 12-755-0044