



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

ENT 59276:2020 PG 1 of 2 JEFFERY SMITH ER

UCC FINANCING STATEMENT

FOLLOWINSTRUCTIONS		UTAH COUNT	Y RECORD
A. NAME & PHONE OF CONTACT AT FILER (optional	N)	2020 May 04 3:33 pm RECORDED FOR LOANPA	, FEE 40.00 BY MA L
B. E-MAIL CONTACT AT FILER (optional)			
filings@loanpalsupport.com			
C. SEND ACKNOWLEDGMENT TO: (Name and Add	iress)		
	- -,		
Loanpal, LLC	I I		
PO Box 4387			
Portland, OR 97208			
1	1		
_	THE ABO	OVE SPACE IS FOR FILING OFFIC	CE LISE ONLY
DEBTOR'S NAME: Provide only one Debtor name (1a)	or 1b) (use exact, full name; do not omit, modify, or abbreviate a		
name will not fit in line 1b, leave all of item 1 blank, check he	ere and provide the Individual Debtor information in item 1	0 of the Financing Statement Addendum	n (Form UCC1Ad)
1a, ORGANIZATION'S NAME		<u> </u>	
		•	
OR 15, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INIT	TIAL(S) SUFFIX
Myers	Leroy		
1c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
553 W 600 N	American Fork	UT 84003-513	4 USA
2 DERTOR'S NAME: Provide celly one Debter name (2)	or 2b) (use exact, full name; do not omit, modify, or abbreviate a		
name will not fit in line 2b, leave all of item 2 blank, check hi	ere and provide the Individual Debtor information in item 1	ny part of the Debtor's name); if any pai 0 of the Financing Statement Addendum	n of the individual Debtor's ii (Form UCC1Ad)
28. ORGANIZATION'S NAME		•	
OR 2b. INDIVIDUAL'S SURNAME			
I	FIRST PERSONAL NAME	ADDITIONAL NAME(SY/INIT	TAL(S) SUFFIX
	FIRST PERSONAL NAME	ADDITIONAL NAME(\$)/INIT	TIAL(S) SUFFIX
2c. MAILING ADDRESS	FIRST PERSONAL NAME		
2c. MAILING ADDRESS		ADDITIONAL NAME(S)/INIT	COUNTRY USA
	СПУ	STATE POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE		STATE POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE 38. ORGANIZATION'S NAME	СПУ	STATE POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE TABLE) 3a. ORGANIZATION'S NAME Loanpal, LLC	CITY E of ASSIGNOR SECURED PARTY): Provide only one Secured	STATE POSTAL CODE Party name (3a or 3b)	COUNTRY USA
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE 3a. ORGANIZATION'S NAME Loanpal, LLC	СПУ	STATE POSTAL CODE	COUNTRY USA
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE TABLE) 3a. ORGANIZATION'S NAME Loanpal, LLC	CITY E of ASSIGNOR SECURED PARTY): Provide only one Secured	Party name (3a or 3b) ADDITIONAL NAME(S)/INIT	COUNTRY USA
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE 38. ORGANIZATION'S NAME Loanpal, LLC OR 3b. INDIVIDUAL'S SURNAME	CITY E of ASSIGNOR SECURED PARTY): Provide only one Secured FIRST PERSONAL NAME	STATE POSTAL CODE Party name (3a or 3b)	COUNTRY USA

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.

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 X Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buy	er Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: Acct # 2014020887	

UCC FINANCING STATEMENT ADDENDUM FOLLOWINSTRUCTIONS

NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement because Individual Debtor name did not fit, check here.	nt; if line 1b was left l	blank					
9a. ORGANIZATION'S NAME							
9b. INDIVIDUAL'S SURNAME							
Myers							
FIRST PERSONAL NAME			1				
Leroy							
ADDITIONAL NAME(S)/INITIAL(S)	S	UFFIX	THE ABOV		ID 500 511 1110 01		-
0. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name	ne or Debtor name th	at did not fit in			Statement (Form UCC		
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the 10e. ORGANIZATION'S NAME	he mailing address in	line 10c	- , , , , , , , , , , , , , , , , , , ,				
						•	
10b. INDIVIDUAL'S SURNAME	-					<u>.</u>	
INDIVIDUAL'S FIRST PERSONAL NAME			<u> </u>				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						(allie	
MOVIDORE & ABOTTONICE NAME (S) ANTITIVE (S)						SUF	FFIX
DC. MAILING ADDRESS	CITY			STATE	POSTAL CODE	co	UNTRY
☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIG	GNOR SECURE	D PARTY	S NAME: Provide	only one na	ame (11a or 11b)		
11a, ORGANIZATION'S NAME							
R 11b. INDIVIDUAL'S SURNAME	Telpot penco			Linning			
TID. INDIVIDUAL & SURNAME	FIRST PERSO		ADDITIONAL NAME(S)/INITIAL(S)			FFIX.	
c. MAILING ADDRESS	CITY			STATE	POSTAL CODE	cou	ÜNTRY
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):					<u> </u>		
· · · · · · · · · · · · · · · · · · ·			•		•		
	. ,						
This FINANCING STATEMENT is to be filed [for record] (or recorded) in REAL ESTATE RECORDS (if applicable)	<u>-</u>	CING STATE timber to be o		-extracted (collateral 🕅 is ful	ed as a fixture	filina
Name and address of a RECORD OWNER of real estate described in item 16					27		
(if Debtor does not have a record interest): croy Myers	County	of: UTA	.H				
•							
	Address Real Est	s of ate: ⁵⁵³ W	600 N, American	ı Fork, UT	`, 84003-5134		
	l l	N: 3681					
	LOT 6, PL	AT A, CAF	RRINGTON EST	ATES SU	BDV, AREA 0.22	2 AC.	
. MISCELLANEOUS:	1.		····				
and the second s							