

LIGO EINIANOINO OTATEMENT

_	LOW INSTRUCTIONS		
A.	NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141		- 100111-1-1-1
В.	E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolte	erskluwer.com	
C.	SEND ACKNOWLEDGMENT TO: (Name and Address)	25900 - SunP	ower
[Lien Solutions P.O. Box 29071	68511	731
	Glendale, CA 91209-9071	ILIL	
Į		FIXTU	IRE _
	File with: Cook, IL		
_	FEBTOR'S NAME: Provide only one Debtor name (1a or 1) ame will not fit in line 1b, leave all of item 11 b ank, check here	<u></u>	ame; do not om e Individual Del
00	1a. ORGANIZATION'S NAME		
OR	1b, INDIVIDUAL'S SURNAME		FIRST PERSON
	RUTKOWSKI		ZBIGNIE\

1985719942

Doc# 1905219042 Fee \$42.00

RHSP FEE:S9.00 RPRF FEE: \$1.00

EDWARD H. MOODY

DOOK COUNTY RECORDER OF DEEDS

DATE: 02/21/2019 11:45 AM PG: 1 OF 3

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Glendale, CA 91209-9071	ILIL		i de de la composition de la final de la f	-
	FIXTURE _I			
File with: Cook, IL		THE ABOVE SPACE	IS FOR FILING OFFICE U	SE ONLY
DEBTOR'S NAME: Provide only one Debtor name ((1a or 1b) (use exact, full name; do not omit	I, modify, or abbreviate any part of the I	Debtor's name); if any part of the	Individual Debtor's
name will not fit in line 1b, leave all of item, 1 b'ank, check	k here and provide the Individual Debt	tor information in item 10 of the Financi	ng Statement Addendum (Form	UCC1Ad)
1a. ORGANIZATION'S NAME			···-·	
16, INDIVIDUAL'S SURNAME RUTKOWSKI	FIRST PERSONA ZBIGNIEV		DITIONAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS	CITY	ST	ATE POSTAL CODE	
221 Ash Street	Des Plaines	s II	. 60018	USA
DEBTOR'S NAME: Provide only one Debtor name ((2a or 2b) (use exp.t, ft II name; do not omit	I, modify, or abbreviate any part of the I	Debtor's name); if any part of the	•
name will not fit in line 2b, leave all of item 2 blank, check	k here and provide the Individual Debi	tor information in item 10 of the Financi	ng Statement Addendum (Form	UCC1Ad)
2a. ORGANIZATION'S NAME	7			
2b. INDIVIDUAL'S SURNAME	FIRST PERSONA	IL NAME AD	DITIONAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS	CITY	ST ST	ATÉ POSTAL CODE	COUNTRY
SECURED PARTY'S NAME (or NAME of ASSIGN	HEE of ASSIGNIOD SECURED BARTY). Dr.	ovide only a Secured Party name (3	2 or 3h)	
3a. ORGANIZATION'S NAME PERPETUAL SUNSHINE I, LLC	EE OI ASSIGNOR SECURED FARTT). FR	Secured Party Hame (5)	a or 30)	
3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	DOITIONAL NAME(SVINITIAL(S)	SUFFIX
MAILING ADDRESS	CITY	S	A E POSTAL CODE	COUNTRY
O BOX 82387	Austin	T	X 173708-2387	USA
COLLATERAL: This financing statement covers the foll		jurposes solely to alve notice to	o all persons, entities and	
is filing is not a lien. This filing was made for at the PV System (residential photovoltaic equitional equipment, installation, etc.) is owned owner of this real property (the "Lessee"), a semed in any way to, imply that the PV system to be a fixture under applicable law, nor to creatended from time to time). For additional que	quipment consisting of solar moduled by, SunPower Capital, LLC and/ and that the Lessee has no owners m is a fixture, as it is the express in eate any relationship between the I	es and including inverter, racking its affiliates, subsidiaries and ship interest in the PV System. In the the the Lessor and Lessee other than the these and Lessee other than the lessor and Lessee other than the less and less are less and less and less are less and less are less and less are less and less are les	d assigns (the "Lessor"), a This filing shall not and s see that the PV System b that created by the Lease	system and leased to hall not be e deemed to
is filing is not a lien. This filing was made for at the PV System (residential photovoltaic equitional equipment, installation, etc.) is owner owner of this real property (the "Lessee"), a semed in any way to, imply that the PV system to be a fixture under applicable law, nor to createned from time to time). For additional questional questional from the property of the property	quipment consisting of solar moduled by, SunPower Capital, LLC and/and that the Lessee has no owners m is a fixture, as it is the express in eate any relationship between the lestions, please contact SunPower sections.	es and including inverter, racki /or its affiliates, subsidiaries an ship interest in the PV System. ntent of the Lessor and the Les Lessor and Lessee other than t at HomeSale@sunpower.com	d assigns (the "Lessor"), a This filing shall not and s see that the PV System b that created by the Lease	system and leased to hall not be e deemed to agreement (as
is filing is not a lien. This filing was made for at the PV System (residential photovoltaic equitional equipment, installation, etc.) is owner of which real property (the "Lessee"), a semed in any way to, imply that the PV system to be a fixture under applicable law, nor to creatended from time to time). For additional questional questional from the property of t	quipment consisting of solar moduled by, SunPower Capital, LLC and/and that the Lessee has no owners m is a fixture, as it is the express in eate any relationship between the lestions, please contact SunPower sections.	es and including inverter, racki /or its affiliates, subsidiaries an ship interest in the PV System. ntent of the Lessor and the Les Lessor and Lessee other than t at HomeSale@sunpower.com em 17 and Instructions) being adm 6b. Check s a Transmitting Utility	d assigns (the "Lessor"), a This filing shall not and s isee that the PV System b that created by the Lease or 1-800-SUNPOWER. Initiative d by a Decedent's Person only if applicable and check of gricultural Lien Non-UC	system and leased to hall not be e deemed to agreement (as S D S D S D S D S D S D S D S D S D S

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UCC FINANCING STATEMENT ADDENDUM

FOL	LOW INSTRUCTIONS							
	AME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line cause Individual Debtor name did not fit, check here	ne 1b was left bla	nk					
100	9a. ORGANIZATION'S NAME			į				
	Sa. OTGANIZATION STANIE							
	<u> </u>			1				
OR	9b. INDIVIDUAL SURNAME			-				
	RUTKOWSKI							
	FIRST PERSONAL NAME			1				
	ZBIGNIEW							
	ADDITIONAL NAME(SVINITIAL(S)	s	UFFIX	1				
				THE ABOVE	SPACE	IS FOR FILING OFFI	CE USE ONLY	
10. D	EBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or	Debtor name that	l did not fit in	line 1b or 2b of the Fi	inancing S	tatement (Form UCC1) (use	e exact, full name;	
	o pot omit, modify, or abbreviate any part of the Debtor's name) and enter the ma				•	, , , ,		
- 1	10a. ORGANIZATION'S NAME							
20	<u> </u>							
OR	10b. INDIVIDUAL'S SURNAME						_	
	INDIVIDUAL'S FIRST PERSONAL NAME							
	INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)						SUFFIX	
		4						
10c.	MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY	
11.	ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO	OR SECURED	PARTY'S	NAME: Provide only	one nam	e (11a or 11b)		
ì	11a. ORGANIZATION'S NAME		95			- (* * * * * -)	.	
OR	11b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
11c.	MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY	
_		<u> </u>						
12. A	ADDITIONAL SPACE FOR ITEM 4 (Collateral):			7				
	•				0,			
					(
						Ö		
13.	This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	e 14. This FINAN	ICING STAT	EMENT:			,	
	REAL ESTATE RECORDS (if applicable)	covers	timber to be	cut covers as-	extracted	collateral 🛛 is filed as a	a fixture filing	
	lame and address of a RECORD OWNER of real estate described in item 16 if Debtor does not have a record interest):	16. Description		te:				
•	JTKOWSKI ZBIGNIEW	Parcel ID:						
110	TROVISKI ZDIGINEVI	09-29-413-003-0000						
		APN: 09-29-413-003-0000 Legal Description: Legal						
		Lot: 23, Township-Range-Sect: 41-12-29, Map						
		Reference: / 41-12-29SE, School District: 207 MAINE						
		TWP HSD, County Use: RESID 1 STORY						
,, ,,,,,								
[See Exhibit for Real Estate]								
17. N	MISCELLANEOUS: 68511731-IL-31 25900 - SunPower Capital, LL PERP	ETUAL SUNSHINE	I, LLC	File with; Cook, IL	PERPÉT	JAL SUNSHINE I, LLC 001-13	571838-001	

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Debtor: RUTKOWSKI, ZBIGNIEW

Exhibit for Real Estate

16. Description of real estate:

Continued

Propen, 50018 Property Address: 2221 Ash Street Des Plaines IL

COCK COUNTY RECORDER OF DEEDS

OFFICE **COOK COUNTY** RECORDER OF DEEDS