

UCC FINANCING STATEMENT Recorded at I Sunrun, Inc.	Request of:				<i>3</i>
A, NAME & PHONE OF CONTACT AT FILER (optional)			×19139		
855-478-6786 B. E-MAIL CONTACT AT FILER (optional)				1 Fee \$40.00	
customercare@sunrun.com		Poc# 13	91293402	Tipe Augroc	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		DUSD FFE:	\$9.00 RPR	FEE: \$1.00	
<u> </u>		EDWARD M			
Sunrun, Inc.	1			ER OF DEEDS	
P.O. Box 4387					2
Portland, CR 97208		DATE: 05	70972013 0	9:49 AM PG: 1 OF	
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A DESTOR'S MANE. Survey of the Abdust of the	full same de set and m			R'FILING OFFICE USE	
DEBTOR'S NAME: Provinct un', and Debtor name (1a or 1b) (use exact, name will not fit in line 1b, leave unloff tem 1 blank, check here and prov 1a. ORGANIZATION'S NAME				atement Addendum (Form U	
16, INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	OITIODA	NAL NAME(S)/INITIAL(S)	SUFFIX
Villarini 1c. MAILING ADDRESS	Luz		STATE	POSTAL CODE	COUNTRY
2507 N East Brook Rd	Elmwood I	Park	IL	60707	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (us exr. st.	full name; do not omit, mo	dify, or abbreviate any pa			
name will not fit in line 2b, leave all of item 2 blank, check here and r.ov [2a. ORGANIZATION'S NAME]	ek e the Individual Debtor	ntormation in item 10 of t	ne Financing St	atement Addendum (Form U	UU1A0)
	'				
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	
CC. MAILING ADDRESS	CITY	2%	STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S	ECURED PARTY): Provid	e c.ly one Secured Party	name (3a or 3t))	
3a. ORGANIZATION'S NAME		()			
OR Sunrun, Inc. 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	VAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
STATE OF THE STATE	, mor remodifie	Will		TO TE TO MILE (O)/HAT IN LE(O)	10011,11
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
595 Market Street, 29th Floor	San Franc	isco	CA	94105	USA
4. COLLATERAL: This financing statement covers the following collateral:	·· · · · · · · · · · · · · · · · · · ·			/Sc.	
The collateral described below is located at: 2507 N E	East Brook Rd, Eli	nwood Park, IL, (60707	(C)	
ALL OF THE DEBTOR'S RIGHT, TITLE AND INTEREST IN		SOLAD ENEDGY E	CHIOMENI	TE ANN THE LIDT	NC
BUT NOT LIMITED TO ROOFTOP SOLAR PANELS, ELECT					
EQUIPMENT, AND ADDITIONS OR REPLACEMENTS OF T					
WARRANTIES ISSUED WITH RESPECT TO THE REFEREN			OICTI III	ENEST INCLUDES A	- t- ,
		-			i
	ust (see UCC1Ad, item 17	and Instructions)	being administr	red by a Decedent's Pers	
6a. Check only if applicable and check only one box:	(222 222 112) 1211 17			if applicable and check or	
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a T	ransmitting Utility		tural Lien Non-	
ALTERNATIVE DESIGNATION (if applicable): X Lessee/Lessor	Consignee/Consignor	Seller/Buyer	Ba	ilee/Bailor	
OPTIONAL FILER REFERENCE DATA:			 -		
Acct # SRC1833708503A					

UNOFFICIAL COPY

UCC FINANCING STATEMENT ADDENDUM

9a. ORGANIZATION'S NAME	<u> </u>					
9b. INDIVIDUAL'S SURNAME Villarini						
FIRST PERSONAL NAME						
Luz						
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX				
DEBTODIO MANGE					S FOR FILING OFFIC	
DEBTOR'S NAME: Provide (10a r. 10h) only one add not omit, modify, or abbreviate any part of the Debtor's	iditional Debtor name or D s name) and enter the mai	ebtor name that did not fit in ling address in line 10c	line 1b or 2b of the F	inancing S	tatement (Form UCC1) (use exact, full r
10a. ORGANIZATION'S NAME						
10b, INDIVIDUAL'S SURNAME	15					
INDIVIDUAL'S FIRST PERSONAL NAME						
	0					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	0/					SUFFIX
MAILING ADDRESS		DIT Y		STATE	POSTAL CODE	COUNT
ADDITIONAL SECURED PARTY'S NAME	Ω	R SECUP &D PARTY	S NAME: Provide o	nly <u>one</u> na	me (11a or 11b)	
11a, ORGANIZATION'S NAME						
Ha, ORGANIZATION'S NAME		⁴ O _*				
	 	FIRST PERSONAL NAM		TADDITIO	NAL NAME(S)/IÑITIAL(S) [SUFFIX
	F	FIRST PERSONAL NAM	<u> </u>	ADDITIO	NAL NAME(S)/IÑITIAL(S	SUFFIX
11b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	0,	ADDITIO STATE	NAL NAME(S)/IÑITIAL(S	
11b. INDIVIDUAL'S SURNAME :. MAILING ADDRESS			<u>C</u>			
			C/Opp			COUNT
11b. INDIVIDUAL'S SURNAME :. MAILING ADDRESS			C/0/1/			
11b. INDIVIDUAL'S SURNAME :. MAILING ADDRESS			C/Opp		POSTAL CODE	
11b. INDIVIDUAL'S SURNAME :. MAILING ADDRESS			C/0/4		POSTAL CODE	
11b. INDIVIDUAL'S SURNAME :. MAILING ADDRESS			C/Opp		POSTAL CODE	
11b. INDIVIDUAL'S SURNAME :. MAILING ADDRESS			C/Opt			
11b. INDIVIDUAL'S SURNAME MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral):	C	DITY	—	STATE	POSTAL CODE	COUNT
11b. INDIVIDUAL'S SURNAME . MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): X This FINANCING STATEMENT is to be filed [for recorded in the collateral] in the collateral process of the col	ord) (or recorded) in the	DITY 14. This FINANCING STATE Covers timber to be	cut covers as-	STATE	POSTAL CODE	
11b. INDIVIDUAL'S SURNAME . MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): X This FINANCING STATEMENT is to be filed [for recorded in the collateral] in the collateral process of the col	ord) (or recorded) in the	14. This FINANCING STATE covers timber to be covers timber to be	cut covers as-	STATE	POSTAL CODE	COUNT
This FINANCING STATEMENT is to be filed [for recorded and address of a RECORD OWNER of real estate of (if Debtor does not have a record interest):	ord) (or recorded) in the	DITY 14. This FINANCING STATE Covers timber to be	cut covers as-	STATE	POSTAL CODE	COUNT
This FINANCING STATEMENT is to be filed [for recorded and address of a RECORD OWNER of real estate of (if Debtor does not have a record interest):	ord) (or recorded) in the	14. This FINANCING STATE covers timber to be covers timber to be	cut covers as-	STATE	POSTAL CODE Collateral X is filed a	COUNT
This FINANCING STATEMENT is to be filed [for reconcedured by the company of the c	ord) (or recorded) in the	14. This FINANCING STATE covers timber to be 16. Description of real estate County of: Cool Address of 2507 N Real Estate:	cut covers as-	extracted	POSTAL CODE Collateral X is filed a	COUNT
This FINANCING STATEMENT is to be filed [for recorded ESTATE RECORDS (if applicable)].	ord) (or recorded) in the	14. This FINANCING STATE Covers timber to be a covers timber timbe	cut covers as- o: K N East Brook Rd, E	extracted of	POSTAL CODE collateral is filed a	COUNT