

UCC FINANCING STATEMENT

SunPower Capital, LLC PO BOX 82387

SUNPOWER

4. COLLATERAL: This financing statement covers the following collateral:

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)				
Lien Operations - (512) 735-0364				
B. E-MAIL CONTACT AT FILER (optional)				
lien@sunpower.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
SunPower Capital, LLC P.O. BOX 82387, Austin, TX 78708-2387				
UCC Fixture: COOK, IL APN: 09-29-413-003 JU00				

Doc# 1933313375 Fee ≇93.00

RHSP FEE: \$9.00 RPRF FEE: \$1.00

EDWARD H. MOODY

COOK COUNTY RECORDER OF DEEDS

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

TX

78758

USA

1-800-

DATE: 11/29/2019 03:00 PM PG: 1 OF 2

•	name will not fit in line 1b, leave all of iten 1 b ank, check here and provide	the Individual Debtor information in item 10 of the F	nancing St	atement Addendum (Form U	CC1Ad)	
	1a. ORGANIZATION'S NAME					
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
	Rutkowski	Zbigniew				
1c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
22	221 Ash Street	Des Plaines	IL	60018	USA	
	DEBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) (use exact, full name will not fit in line 2b, leave all of item 2 blank, check here and provide	name; do not omit, modify, or abbreviate any part of the Individual Debtor information in item 10 of the F				
OR	2a. ORGANIZATION'S NAME	τ_{\bigcirc}				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
2c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
3. 8	ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	RED PARTY): Provide only one Secur Party name	ъе (За or 3t)		
	3a. ORGANIZATION'S NAME	し				
OR	PERPETUAL SUNSHINE I, LLC					
~IN	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	OITIOC 1	NAL NAME(S)/INITIAL(S)	SUFFIX	
3c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	

Austin

Residential Solar Photovoltaic Equipment. For additional questions, please contact SunPower at HomeSale @ sunpower.com &

1. DEBTOR'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's name); if any part of the Individual Debtor's

	- TT-10				
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 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 Non-UCC Filing				
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Bu	ryer Bailee/Bailor Licensee/Licensor				
8. OPTIONAL FILER REFERENCE DATA:					
PERPETUAL SUNSHINE I, LLC - B94 - 1571838					

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UNOFFICIAL COF

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 Rutkowski FIRST PERSONAL NAME Zbigniew ADDITIONAL NAME(S)/INITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a 2, 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 STATE POSTAL CODE COUNTRY ADDITIONAL SECURED PARTY'S NAME or 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 POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): OFFICE 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) covers as-extracted collateral is filed as a fixture filing covers timber to be cut 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): APN 09-29-413-003-0000 - Legal Lot: 23, Township-Range-Sect: 41-12-RUTKOWSKI ZBIGNIEW 29, Map Reference: / 41-12-29SE, School District: 207 MAINE TWP HSD, 2221 Ash Street County Use: RESID 1 STORY Des Plaines, IL 60018 Des Plaines, IL 60018 17. MISCELLANEOUS: PERPETUAL SUNSHINE I, LLC - B94 - 1571838