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



UCC FINANCING STATEMENT

A. NAME & PHONE OF CONTACT AT FILER (option	anal)
the man and the first of the first the first to the first the first to the first the first to th	onar)
B. E-MAIL CONTACT AT FILER (optional)	
filings@loanpalsupport.com	The same of the sa
C. SEND ACKNOWLEDGMENT TO: (Name and A	Address)
Loanpal, LLC PO Box 4387 Portland, OR 97208	
	- I
DEBTOR'S NAME: Provide and Debtor name of name will not fit in line 1b, leave 2' of fit in 1 blank, check ta. ORGANIZATION'S NAME	(1a or 1b) (use exact, full name; do not om k here and provide the Individual De

security interest includes all warranties issued with respect to the referenced collateral.

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

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 03/04/2020 01:10 PM PG: 1 OF 2

		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY			
DEBTOR'S NAME: Provide only and Debtor name (1a or 1b) (us name will not fit in line 1b, leave at of the not blank, check here	se exact, full name; do not omit, modify, or abbreviate and provide the Individual Debtor information in item	any part of the Debto 10 of the Financing St	r's name); if any part of the ti atement Addendum (Form U	ndividual Debtor's CC1Ad)	
1a. ORGANIZATION'S NAME				<u></u>	
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	
Moreira	Rolando	Rolando			
3122 GROVE AVE	BERWYN	STATE	60402-3022	COUNTRY	
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (us name will not fit in line 2b, leave all of item 2 blank, check here 2a. ORGANIZATION'S NAME	e xac' full name; do not omit, modify, or abbreviate and pri vide the Individual Debtor information in item	any part of the Debtor 10 of the Financing St	i's name); if any part of the Ir atement Addendum (Form U	ndividual Debtor's CC1Ad)	
OR 25. INDIVIDUAL'S SURNAME	FIRST PEPCONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	
Moreira	Josefa			00	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
3122 GROVE AVE	BERWYN	IL	60402-3022	USA	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIG	BNOR SECURED PARTY): Provide col, one Secured	Party name (3a or 3b))		
3a. ORGANIZATION'S NAME Loanpal, LLC	C				
36, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
8781 Sierra College Boulevard	Roseville	€A.	95746	USA	
4. COLLATERAL: This financing statement covers the following collater	eral:		J _x c.		

All of the debtor's right, title and interest in the Photovoltaic Solar Energy Equipment or Energy Storage/Battery Equipment (If any), including 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

	INT THE
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 <u>only</u> if applicable and check <u>only</u> one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	6b. Check only if applicable and check only one box 2-13-W Agricultural Lien X Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Bu	yer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: Acct # 1904016953	

2006416019 Page: 2 of 2

UNOFFICIAL COPY

UCC FINANCING STATEMENT ADDENDUM

OLLOWINSTRUCTIONS					
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State because Individual Debtor name did not fit, check here	ement; if line 15 was left blank	1			
9a. ORGANIZATION'S NAME		-			
96. INDIVIDUAL'S SURNAME		-			
Moreira					
FIRST PERSONAL NA 'E		1			
Rolando ADDITIONAL NAME(S)", NITIA" (S)	loure	_			
ADDITIONAL NAME(S) NITM (S)	SUFFIX				
DEBTOR'S NAME: Provide (10a or Up, only one additional Debtor)	name or Deblor name that did not fit is			IS FOR FILING OFFI	
do not omit, modify, or abbreviate any part of the Debtor's name) and ent	er 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)	70.				ISUFFIX
	4			\	SOPPIX
oc. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
1. ADDITIONAL SECURED PARTY'S NAME or AS	SIGNOR SECURFU PARTY	"S NAME: Provide	only <u>one</u> n	ame (11a or 11b)	
THE SHOPHIES HONE	(1)×				
R 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S	SUFFIX
				-	
c. MAILING ADDRESS	CITY	0.	STATE	POSTAL CODE	COUNTRY
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):					
•			0,		
•					
				Visc.	
				Trico	
				Ö	
This FINANCING STATEMENT is to be filed [for record] (or recorded)	in the 14. This FINANCING STATE	EMENT,	-		
REAL ESTATE RECORDS (if applicable)	covers timber to be		-extracted	collateral X is filed a	as a fixture filing
 Name and address of a RECORD OWNER of real estate described in item (if Debtor does not have a record interest); 		10001		<u> </u>	and a manager than g
colando Moreira and Josefa Moreira	County of: Coo	k			
oralido Moretta and Josefa Moretta					
	Address of Real Estate: 3122 G	GROVE AVE. BE	RWYN	I 60402-3022	
	Real Estate: 3122	ONO 12 11 12, DE		2, 00-102-3022	
	APN: 1631	1106027000	0		
	LOTS 12 AND 13 IN	BLOCK 4 IN BE	RWYN		
	SECTION 31, TOWN PRINCIPAL MERID				HIRD
	THE OF THE PIERO	, COOK C	JUITI,	EDUITOU,	