

## **UCC FINANCING STATEMENT**

		DQC# 20,		<del>_</del>		
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141			RHSP FEE:\$9.00 RPRF FEE: \$1.00			
			TOWARD M. MOODY			
uccfilingreturn@wolterskluwer.com  C. SEND ACKNOWLEDGMENT TO: (Name and Address) 31224 -		COOK COUNT	COOK COUNTY RECORDER OF DEEDS			
		DATE: 05/05/2020 11:35 AM PG: 1 OF 3				
Lien Solutions 7412	40819	v.		20, 3		
P.O. Box 29071		qu	الرائمية المداريون والمنظمان فيميني ميمينيوسية مميادها			
Glendale, CA 91209-9071						
FIX1	TURE					
File ∵th: Cook, IL		HE ABOVE SPACE I	FOR FILING OF	FICE USE ONLY		
1. DEBTOR'S NAME: Provide ont ont Debtor name (1a or 1b) (use exact, f name will not fit in line 1b, leave all of ite 11 lank, check here and provide	full name; do not omit, modify, or ab de the Individual Debtor information					
1a. ORGANIZATION'S NAME	de ine marioda bebler mormanor	III TO OT BIO T INESTON	, otalement Addendar	n (i din ded na)		
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADD	ITIONAL NAME(S)/INITI	AL(S) SUFFIX		
Campuzano	Veronica			}		
1c. MAILING ADDRESS	CITY	STA	TE POSTAL CODE	COUNTRY		
117 Marshall Avenue	Bellwood	IL	60104-1123	USA		
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use ex.ct, 1						
	rethe Individual Debtor information	in item 10 of the Financin	3 Statement Addendur	n (Form UCC1Ad)		
2a. ORGANIZATION'S NAME	T					
OR ON INDIVIDUAL SCIENAME		Line				
2b. INDIVIDUAL'S SURNAME	FIRS) PERSONAL NAME	[ ADD	ITIONAL NAME(S)/INITI/	AL(S) SUFFIX		
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2c. MAILING ADDRESS	CITY	STA	TE POSTAL CODE	COUNTRY		
	1/2,			COUNTRY		
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SE	1/2,			COUNTRY		
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3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SE	1/2,	Secured Party name (3a				
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SE  3a. ORGANIZATION'S NAME  Sunnova TE Management LLC	CURED PARTY): Provide or ly one	Secured Party name (3a	or 3b)			
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SE  3a. ORGANIZATION'S NAME  Sunnova TE Management LLC	CURED PARTY): Provide or ly one	Secured Party name (3a	OF 3b)			
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3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SE  3a. ORGANIZATION'S NAME Sunnova TE Management LLC  3b. INDIVIDUAL'S SURNAME  3c. MAILING ADDRESS  20 Greenway Plaza, Suite 475	ECURED PARTY): Provide or ly one	Secured Party name (3a	OF 3b)  OF STAL CODE	AL(S) SUFFIX		
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2012608117 Page: 2 of 3

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## **UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS							
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line							
because Individual Debtor name did not fit, check here							
		1					
		]					
OR 9b. INDIVIDUAL'S SURNAME	<u> </u>	1					
Campuzano		]					
FIRST PERSONAL NAME Veronica							
	Leuren	ļ					
ADDITIONAL NAME(SYINITIAL(S)	SUFFIX				AE 11AE A111 17		
		1		E IS FOR FILING OFFI			
10. DEBTOR'S NAME: Provide (10a < 10h) only one additional Debtor name or to do not omit, modify, or abbreviate any part c (the Debtor's name) and enter the ma		tine 1b or 2b of the Fi	nancing S	statement (Form UCC1) (use	e exact, full name;		
10a. ORGANIZATION'S NAME	many deduces at time 100	<del> </del>					
OR 10b. INDIVIDUAL'S SURNAME							
9/.							
INDIVIDUAL'S FIRST PERSONAL NAME							
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)					SUFFIX		
	Laure		T 07475	Locatilope	0011117711		
10c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY		
11. ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO	R SECURED (PARTY'S I	MANE D. M II.		1 (14) (14)			
11. ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO 11a. ORGANIZATION'S NAME	R SECURED PARTY ST	NAME: Provide only	one nam	e (Ha or Hb)			
	//×						
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)INITIAL(S)	SUFFIX		
11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY		
		(//	1				
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		1					
			Q,				
			(				
				10			
				0			
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14. This FINANCING STAT	EMENT:					
REAL ESTATE RECORDS (if applicable)	covers timber to be	cut covers as-	extracted	collateral Sis filed as a	a fixture filing		
<ol> <li>Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):</li> </ol>	16. Description of real estat	e:					
(v 2000) 100 100 100 100 100 100 100 100 100	Parcel ID:						
	15-09-104-008	3-0000					
	l <u>.</u>						
	Owner Name: Jose Cid Morales and Veronica						
	Angelica Campuzano Legal Description:						
		RESUBDIVISION BLKS1-3 NW4 S09 T39N R12E 3P					
Legal Lot: 8 For Property Located At: 117 M/							
AVE, BELLWOOD IL 60104-1123 C008 APN:							
	[ See Exhibit for Rea	al Estate ]					
17. MISCELLANEOUS: 74140819-IL-31 31224 - GREATAMERICA/SUNNOVA Sunnov	va TE Management LLC	File with: Cook, IL	JI002167	419			

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Debtor: Campuzano, Veronica

**Exhibit for Real Estate** 

16. Description of real estate:

Continued

15-09-104-008-0000 Map Reference: / 39-12-09NW County: COOK Document: 27933103 Section, Township,

Range: 39-12-09 County: Cook

