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		Doc# 20265	1992654000 202654000 40003 F	ee \$93.00	r
CC FINANCING STATEMENT Recorded a Vivint Sola	RHSP FEE: \$9.00 RPRF FEE: \$1.00 EDWARD M. MOODY COOK COUNTY RECORDER OF DEEDS				
NAME & PHONE OF CONTACT AT FILER (optional) 877-404-4129 (option 7)					
E-MAIL CONTACT AT FILER (optional)		DATE: 09/21/2			
filings@vivintsolar.com SEND ACKNOWLEDGMENT TO: (Name and Address)			t the man to the contract and the state of		
Vivint Solar Developer, LLC	\neg				
P.O. Box 4589					
Portland, OR 97.00					
		THE ABOVE	SPACE IS FO	OR FILING OFFICE USE	ONLY
DEBTOR'S NAME: Provide only fine Debtor name (1a or 1b) (use explained will not fit in line 1b, leave all of them. 1 thank, check here and part of the Company of the compa	act, full name; do not omit, m provide the Individual Debtor	nodify, or abbreviate any pa	art of the Debto	r's name); if any part of the In latement Addendum (Form UC	dividual Debtor's
1b. INDIVIDUAL'S SURNAME Atlas	Sarah	FIRST PERSONAL NAME Sarah		NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS 734 46TH ST	LYONS		STATE	POSTAL CODE 60534-1821	COUNTRY USA
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use ex- name will not fit in line 2b, leave all of item 2 blank, check here [and p	act iull name; do not omit, m	odify, or abbreviate any pa	rt of the Debto	r's name); if any part of the In- atement Addendum (Form UC	dividual Debtor's
2a. ORGANIZATION'S NAME	nov de l' e i idividual Deptor	millionnation in item 10 or tr	ie Financing S	atement Addendum (Form UC	CC1Ad)
2b. INDIVIDUAL'S SURNAME	TEIDOT NO WILL		1.===		SUFFIX
25. ORDIVIDUAL O CONTRAINE	FIRST PER ONAL	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	
MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR 3a. ORGANIZATION'S NAME Vivint Solar Developer, LLC	R SECURED PARTY): Provid	de only <u>one</u> Seci-Ju Party	name (3a or 3l	5)	
3b. INDIVIDUAL'S SURNAME	EIDET BERCONAL	NAME	- Longition		
OS. HISTORIA GOTTANIA	FIRST PERSONAL	FIRST PERSONAL NAME		NAL NAME(S)/INITIAL(S)	SUFFIX *
			- I		1
	сіту Lehi		STA (E	POSTAL CODE 84043	COUNTRY
1800 W. Ashton Blvd.			STA(E	84043	
1800 W. Ashton Blvd.			STATE		
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MAILING ADDRESS 1800 W. Ashton Blvd. OLLATERAL: This financing statement covers the following collateral: See Exhibit A attached hereto.			STALE	84043	
1800 W. Ashton Blvd. OLLATERAL: This financing statement covers the following collateral:			STALE	84043	
1800 W. Ashton Blvd. OLLATERAL: This financing statement covers the following collateral: See Exhibit A attached hereto.			eing administe	84043	S_X P_ S_X M_X SC_X E_N
OLLATERAL: This financing statement covers the following collateral: See Exhibit A attached hereto. The control of applicable and check only one box; Collateral is held in a check only if applicable and check only one box:	Lehi Trust (see UCC1Ad, item 17	61	eing administe	red by a Decedent's Personal f applicable and check only or	S_X P_ S_X M_X SC_X E_N Representative
1800 W. Ashton Blvd. OLLATERAL: This financing statement covers the following collateral: See Exhibit A attached hereto.	Lehi Trust (see UCC1Ad, item 17	Fransmitting Utility	eing administe b. Check only	red by a Decedent's Personal f applicable and check only or trural Lien X Non-UCC F	S Y S X M Y SC Y E W Representative

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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 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME Atlas FIRST PERSONAL NAME Sarah ADDITIONAL NAME(S)/(\siT)'...(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10s or 10) nly 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 Center'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 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 STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): OFFICE 13. X This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable) 14, This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral is filed as a fixture filing 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): County of: Cook Sarah Atlas Address of Real Estate: 7734 46TH ST, LYONS, IL, 60534-1821 APN: 18013200480000 See Exhibit B Property Description: 17. MISCELLANEOUS:

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APN: 18013200480000 Service No.: S-6295659

EXHIBIT A

This NOTICE (this "Notice") is provided by VIVINT SOLAR DEVELOPER, LLC, a Delaware limited liability company ("Company") with reference to the following facts:

- 1. Sarah Atlas ("Homeowner") and Company entered into that certain Residential Solar System Lease Agreement, dated as of January 16, 2020 (the "Agreement"). Any capitalized term used but not defined herein shall have the meaning ascribed to such term in the Agreement. To request a copy of the Agreement, please contact Company by calling 1.877.404.4129, or by writing at 1800 W. Ashton Blvd., Lehi, UT 84043.
- 2. The Agreement commenced on January 16, 2020 and will terminate on approximately August 21, 2040 (the "Term"). At the end of the Term, Homeowner may elect to continue with the Agreement on a year-to-year basis, enter into a new agreement, request removal of the System, or purchase the System. If Homeowner elects removal, then Company shall remove the System within ninety (90) days.
- 3. Pursuant to the Agreement, Homeowner granted to Company a right to access, enter into, and use the Property for the installation, operation, and maintenance of a solar photovoltaic energy system (the "System") at Homeowner's residential property located at 7734 46TH ST, LYONS, County of Cook, IL, 60534-1821 (the "Property").
- 4. Pursuant to the terms and conditions of the Agreement, the Company has agreed to lease the System to Homeowner and Homeowner has agreed to pay monthly rent to the Company.
- 5. Company owns the System, collectively with all associated rights, privileges, assets, incentives, rebates, and benefits arising from, relating to, or attributable to the System (the "System Interests"). At all times during the Term, the System and the System Interests shall remain Company's sole personal property and shall not be deemed or characterized as

- a "fixture" or any part of the "realty" as those terms may be defined by applicable law. THIS NOTICE SHALL NOT IN ANY WAY MODIFY THE CHARACTER OR CLASSIFICATION OF THE SYSTEM. THE SYSTEM IS NOT A FIXTURE.
- 6. COMPANY DOES NOT HAVE A SECURITY INTEREST OR LIEN ON THE PROPERTY. THIS NOTICE SHOULD NOT BE CONSTRUED AS AN ENCUMBRANCE AFFECTING TITLE TO THE PROPERTY.
- 7. Pursuant to the terms and conditions of the Agreement, if the Homeowner proposes to sell or transfer the Property, it must provide Company with thirty (30) days' prior written notice of such sale or transfer, including the name of the proposed purchaser or transferee ("Property Transferee"). If Property Transferee will not assume the obligations under the Agreement, or if Company determines that Property Transferee does not qualify, then Homeowner will be required to purchase the System at Four Dollars (\$4) per watt installed, subject to reduction pursuant to the terms of the Agreement.
- 8. If Homeowner defaults under the Agreement and Company elects to terminate the Agreement, then Homeowner may be responsible to purchase the System at Seven Dollars (\$7) per watt installed, subject to reduction pursuant to the terms of the Agreement. Alternatively, Company may elect to terminate the Agreement and remove and retake the System.
- 9. If Company defaults under the Agreement and Homeowner elects to terminate the Agreement, then Company shall remove the System within ninety (90) days.
- 10. The Agreement is binding upon Homeowner's and Company's respective heirs, legal representatives, successors, and permitted assigns.
- 11. This Notice shall not, under any circumstances, be deemed to modify or change any provision of the Agreement. In the event of any conflict between the terms of this Notice and the Agreement, the Agreement shall control.

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Exhibit B

THE WEST 39.3 FEET OF THE EAST 117.9 FEET OF LOT 44 IN RIVERSIDE ACRES, A SUBDIVISION IN THE SOUTH 1/2 OF SECTION 1, TOWNSHIP 38 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN. IN COOK COUNTY, ILLINOIS.

PIN: 18-01-320-048-0000

IL_COOK_Atlas Cook Colling Clarks Office FOR INFORMATION PURPOSES ONLY: