## UNOFFICIAL COPY

LICO FINANCINO CTATEMENT	Record at the request of and when recorded return to: Loanpal, LLC							
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS				110525	(28) (20) (20) (20) (20) (20) (20) (20) (20			
A. NAME & PHONE OF CONTACT AT FILER (optional)			Doc# 2110528074 Fee \$93.00					
B. E-MAIL CONTACT AT FILER (optional)			ien FFF:59.00	RPRF	FEE: \$1.00			
filings@loanpalsupport.com			RHSP FEE:S9.00 RPRF FEE: \$1.00 KAREN A. YARBROUGH					
C. SEND ACKNOWLEDGMENT TO: (Name and	Address)							
	·		OOK COUNTY CL		:58 AM PG: 1 OF 3			
Loanpal, LLC		ימ	ATE: 04/15/26	021 11	:58 AM PG: 1 0, 5			
PO Box # 981440						. •		
El Paso, TX 79998- 1440		1			<del>-</del>			
		<b>_</b>			R FILING OFFICE USE			
1. DEBTOR'S NAME: Provide c Ny c je Debtor name name will not fit in line 1b, leave all of 'am blank, che		ne; do not omit, modify, or abbr Individual Debtor information in						
1a. ORGANIZATION'S NAME								
OR 1b. INDIVIDUAL'S SURNAME	F	IRST PERSONAL NAME	IAD		NAL NAME(S)/INITIAL(S)	SUFFIX		
Molina		Ageo			, , , , ,			
1c. MAILING ADDRESS		ITY	·	STATE	POSTAL CODE	COUNTRY		
4925 W 23Rd Pl		cicero		IL	60804	USA		
DEBTOR'S NAME: Provide only one Debtor name name will not fit in line 2b, leave all of item 2 blank, che     2a. ORGANIZATION'S NAME		ne; do not omit, modify, or abbr Individual Debtor information in						
OR 25. INDIVIDUAL'S SURNAME	F	FIRST CEPSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX		
2c. MAILING ADDRESS	C	ITY DX		STATE	POSTAL CODE	COUNTRY		
3. SECURED PARTY'S NAME (or NAME of ASSIG	INEE of ASSIGNOR SECURE	D PARTY): Provide only one S	Party name	(3a or 3t	D)			
3a, ORGANIZATION'S NAME								
Loanpal, LLC			<u> </u>					
36. INDIVIDUAL'S SURNAME	F	IRST PERSONAL NAME	4	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
3c. MAILING ADDRESS	C	ITY	- (	, T.ATE	POSTAL CODE	COUNTRY		
8781 Sierra College Boulevard		Roseville		CA	95746	USA		
4. COLLATERAL: This financing statement covers the f	ollowing collateral:				X.c.			
All of the debtor's right, title and Battery Equipment (If any), inclu- mounted batteries, stand alone be mounted racking systems, related security interest includes all warr	iding but not limi atteries, inverters d equipment, and	ted to rooftop solo , cables and wires, additions or repla	ar panels, s support br acements of	olar r acket f the s	oofing materials, s, roof mounted same. In addition al.	, wall or ground n, the		
·		-			Sy			

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 exponal Representative 6a. 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 Filling.

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Selter/Buyer Bailee/Bailor Liconsee/Licensor

8. OPTIONAL FILER REFERENCE DATA:
Acct # 2014039118

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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	-			•	
				 	İ
9b. INDIVIDUAL'S SURNAME		-			
Molina FIRST PERSONAL NAME		_			
Ageo					
ADDITIONAL NAME(S)/INIT' \(\frac{1}{2}\)(S)	SUFFIX	1			
DEDTORIO MAIS		<del></del>		S FOR FILING OFFICE	
DEBTOR'S NAME: Provide (10. or 1.b) only one additional Debt do not omit, modify, or abbreviate any par of the Debtor's name) and of		in line 1b or 2b of the Fina	ancing S	tatement (Form UCC1) (us	e exact, full nam
10a. ORGANIZATION'S NAME				i	
10b, INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	0				SUFFIX
	4				
. MAILING ADDRESS	CITY	S	TATE	POSTAL CODE	COUNTRY
	ASSIGNOR SECURED PART	Y'S NAME: Provide onl	y <u>one</u> na	ime (11a or 11b)	
11a. ORGANIZATION'S NAME	* Ox				
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM'	A	ODITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
. MAILING ADDRESS 1	CITY		TATE	POSTAL CODE	COUNTRY
		(0)			
ADDITIONAL SPACE FOR ITEM 4 (Collateral):		1			
		C	)'		
				Disting.	
				Ö	
This FINANCING STATEMENT is to be filed [for record] (or record REAL ESTATE RECORDS (if applicable)	led) in the 14. This FINANCING STAT		Iraciad c	ollateral X is filed as	A fixture filipa
Name and address of a RECORD OWNER of real estate described in it (if Debtor does not have a record interest):			macieu c	oliateral A is med as	a fixture filling
geo Molina	County of: CO	OK			
	, , , , , , , , , , , , , , , , , , ,				
	Address of Real Estate: 4925	W 23Rd Pl, cicero, IL	., 60804	4	
		0010010000			
		82130130000			
	See Exhibit A				

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**EXHIBITS-A** 

LOT 6 (EXCEPT THE WEST 8 FEET THEREOF) AND THE WEST 12 FEET OF LOT 7 IN BLOCK 7 IN MORTON PARK SUBDIVISION OF THE NORTHEAST 1/4 SECTION 28, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS IL\_COOK\_MOLINADOR COOK COUNTY CLORA'S OFFICE