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Licensee/Licensor

6b. Check only if applicable and check only one box:

Agricultural Lien

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS		*2119545026*				
A. NAME & PHONE OF CONTACT AT FILER (optional)		Doc# 2119545026 Fee \$93,00				
Lien Operations - (800) 786-7693				•		
B. E-MAIL CONTACT AT FILER (optional)		RHSP FEE:\$9.00 RPRF FEE: \$1.00				
lien@sunpower.com		KAREN A. YARBROUGH				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	:					
SunPower Capital, LLC	¬	COOK COUNTY CLE				
P.O. BOX 841246, Los Angeles, CA 90084-1246	1	DATE: 07/14/2021	l 02:01 PM PG: 1 (OF 2		
UCC Fixture: COOK, IL						
APN: 15-34-315-005 0000	1					
		E ABOVE SDACE IS E	OR FILING OFFICE USE	ONI V		
1. DEBTOR'S NAME:. Provide or 'v r_ie Debtor name (1a or 1b) (use exact, fu						
name will not fit in line 1b, leave all ofm. blank, check here and provide	de the Individual Debtor information in					
1a. ORGANIZATION'S NAME						
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX			
Ivan	Joseph					
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
3617 Arthur Avenue	Brookfield	IL	60513	USA		
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact u	ull name: do not omit, modify, or abbre	eviate any part of the Debto	r's name); if any part of the Ir	ndividual Debtor's		
<u>-</u>	de the Individual Debtor information in	• •				
2a. ORGANIZATION'S NAME	7					
	' ()			,		
OR 26. INDIVIDUAL'S SURNAME	FIRST FEPSONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX		
· ·	0/					
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
	1//					
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC	CLIDED DARTY): Provide only one S	e 1 Party name (3a or 3	h)			
3a. ORGANIZATION'S NAME	OORED FARTT). TTO FIGE STILLY DIE S	· Sale (1 art) hame (od 6) e	<u> </u>			
ULTRALIGHT 2 RESIDENTIAL SOLAR, LLC	`					
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ONAL NAME(S)/(NITIAL(S)	SUFFIX		
		4				
3c. MAILING ADDRESS	CITY	S FATE	POSTAL CODE	COUNTRY		
PO Box 82387	Austin	ΤX	73708-2387	USA		
	Austri	117	7.0700-2307	OOA		
4. COLLATERAL: This financing statement covers the following collateral:			//x:			
Residential Solar Photovoltaic Equipment which may con			instant Colonso To	وريمير فأمصطييم		
For questions or assistance concerning this filing, we urg request, select Submit Online under refinance or home sa		ver.com/lite for the i	asiesi esponse. 10	submit your		
request, select Submit Offline under reilitatice or nome sa	are section.		CV			
,						
	· ·			•		
,						

0005108-02

6a. Check only if applicable and check only one box:

TIONAL FILER REFERENCE DATA:

7. ALTERNATIVE DESIGNATION (if applicable):

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and instructions)

Manufactured-Home Transaction

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UCC FINANCING STATEMENT ADDENDUM

FOL	LOWINSTRUCTIONS							
	AME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if ecause Individual Debtor name did not fit, check here	line 1b was le	ft blank					
9a. ORGANIZATION'S NAME								
OR	9b. INDIVIDUAL'S SURNAME							
	Ivan							
	FIRST PERSONAL NAME							
ļ	Joseph							
	ADDITIONAL NAME(S)/INITIAL(J)		SUFFIX					
	<u> </u>				_	S FOR FILING OFFICE		
	DEBTOR'S NAME: Provide (10a or 10b) <u>and one</u> additional Debtor name or do not omit, modify, or abbreviate any part of the Dribtor's name) and enter the m			line 1b or 2b of the F	inancing S	tatement (Form UCC1) (use	exact, full name;	
	10a. ORGANIZATION'S NAME	anning addition		•				
	4							
OR	10b. INDIVIDUAL'S SURNAME					,		
	<u> </u>							
	INDIVIDUAL'S FIRST PERSONAL NAME							
	· INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S))/					SUFFIX	
		4						
10c.	MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY	
			<u></u>					
11.		OR SECUE	RET PARTY	S NAME: Provide	only <u>one</u> na	ame (11a or 11b)		
	11a. ORGANIZATION'S NAME							
OR	11b. INDIVIDUAL'S SURNAME	FIRST PERS	ONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
				()				
11c.	MAILING ADDRESS	CITY		10.	STATE	POSTAL CODE	COUNTRY	
10	ADDITIONAL CRACE FOR ITEMA (Collectors)	<u> </u>			 _			
12.7	ADDITIONAL SPACE FOR ITEM 4 (Collateral):				2,			
					'			
						Ö		
13.	✓ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FIN	ANCING STATE	MENT:				
15 1		+ -	ers timber to be o	h1	extracted of	collateral / is filed as a	fixture filing	
(if Debter door not have a record interest):			16. Description of real estate: APN 15-34-315-005-0000 - PORTIA MANOR BLK 16 LOT 19					
	seph Ivan		hur Avenue		IZ IVIZIN	ON BEN 10 EOT 13		
	17 Arthur Avenue pokfield, IL 60513		d, IL 60513					
יוט	ookiield, iE 00010	COOK						
17	MISCELLANEOUS:							
17.1	ANGULLEANEUUU. 	E 246100	00					