#### **UCC FINANCING STATEMENT**

**FOLLOW INSTRUCTIONS** 

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141						
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	25556 - SOLAR MOSAIC					
Lien Solutions P.O. Box 29071	80640912					
Glendale, CA 91209-9071	ILIL					
	FIXTURE					
File with: Cook, IL						



\*2120012028\*

Doc# 2120012028 Fee \$93.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 07/19/2021 11:34 AM PG: 1 OF 4

FIXTU	JRE						
File vith: Cook, IL		IF AROVE SPA	CE IS FO	OR FILING OFFICE U	SE ONLY		
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full							
name will not fit in line 1b, leave all of ite (11 bank, check here and provide to							
1a. ORGANIZATION'S NAME		"					
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	•	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX		
Powers	Robert						
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY		
14600 Kilbourn Ave	Midlothian		fL	60445	USA		
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exc ct, fi II							
	the Individual Debtor information in	n item 10 of the Fin	ancing Sta	stement Addendum (Form I	UCC1Ad)		
2a. ORGANIZATION'S NAME	$\tau_{\wedge}$				•		
OR 2b. INDIVIDUAL'S SURNAME	FIRST PEPSONAL NAME		ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX		
			1,00,1110,	we transform meter	007712		
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY		
	1//						
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	JRED PARTY): Provide only une	Secured Party nam	e (3a or 3t	o)			
3a. ORGANIZATION'S NAME							
Solar Mosaic, Inc							
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)INITIAL(S)		SUFFIX		
3c. MAILING ADDRESS	CITY		S A E	POSTAL CODE	COUNTRY		
300 Lakeside Drive, FL 24	Oakland		<b>O</b> .		USA		
4. COLLATERAL: This financing statement covers the following collateral:	Oakiand		I CA	1 94 612	TUSA		
The collateral includes the following, whether now owned or hereaf	fter acquired, whether now	existing or here	eafter ar	ising, and wherever I	ocated:		
<ol> <li>All solar panels, inverters, battery storage, hot water solar system monitoring and/or other distributed generation interconnect equipm the Solar Equipment, "Purchased Goods") excluding Fixtures (as d Fixtures are referred to as "Collateralized Goods");</li> </ol>	ent (collectively, "Solar Eq	uipment") and I	nome im	provement orc ducts	(together with		
2. All accessions, attachments, accessories, tools, parts, supplies,	replacements of and addit	ions to any Coll	ateralize	ed Goods;	p H		
<ol> <li>All proceeds from warranty claims related to the Collateralized G ("Home Improvement Agreement") and, if debtor has received an obetween the debtor and its operations and maintenance contractor</li> </ol>	perations and maintenanc	e loan, the ope	rations a				
<ol> <li>All rebates and incentives that are payable as a result of installin assigned to debtor's solar contractor or operations and maintenance</li> </ol>		s except for suc	h rebate	es and incentives whi	ch have		
5. All debtor's rights, title, interests, and remedies under all agreem	nents, statements and othe	r documentatio	n relatin	g to the Collateralized	d Goods		
5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral isheld in a Trust	(see UCC1Ad, item 17 and Instr	uctions) being a	administer	ed by a Decedent's Perso	nal Representative		
6a. Check <u>only</u> if applicable and check <u>only</u> one box:				6b, Check only if applicable and check only one box:			
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transmitting	Utility	Agricult	ural Lien 🔲 Non-UC	C Filing		
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor C	Consignee/Consignor	Seller/Buyer	Baile	ee/Bailor Lice	nsee/Licensor		
8. OPTIONAL FILER REFERENCE DATA: 80640912 165026			249	9733			

## **UNOFFICIAL COPY**

#### **UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS					
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line	e 1b was left blank				
because Individual Debtor name did not fit, check here	-				
9a. ORGANIZATION'S NAME					
		ŀ			
OR 96. INDIVIDUAL'S SURNAME		_			
Powers		1			
FIRST PERSONAL NAME		_			
Robert					
ADDITIONAL NAME(SVINITIAL(S)	SUFFIX	_			•
	031.12	TUE 450	VE ODAO	E 10 E00 EU 110 OEE1	OF HOE ONLY
40 DEDTODIO MANE DE 12 440 AND				E IS FOR FILING OFFI	
10. DEBTOR'S NAME: Provide (10a a 10h, only one additional Debtor name or 0 do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mai		tit in line 1b or 2b of the	Financing 8	Statement (Form UCC1) (us	e exact, full name;
10a. ORGANIZATION'S NAME	ang address in line 100				
OR 10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					_
					•
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)	) /				SUFFIX
	4				
10c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
			1		
11. ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO	R SECURED PARTY	"S NAME: Provide or	nly <u>one</u> nam	ne (11a or 11b)	
11a. ORGANIZATION'S NAME	9/	) 🚜			
OR THE INDUSTRIAL SCHOOLS					
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	ONAL NAME(S)/INITIAL(S)	SUFFIX
				_	
11c. MAILING ADDRESS	CITY	10.	STATE	POSTAL CODE	COUNTRY
			4		
<ol> <li>ADDITIONAL SPACE FOR ITEM 4 (Collateral):</li> <li>(including, without limitation, the Home Improvement Agreement and</li> </ol>	d Operations and M	aintonanco Agroor	nontic n	4	
(including, without timitation, the frome improvement Agreement and	u Operations and w	aimenance Agreer	ner G and		
6. All consideration received from the collection, sale or other dispos					
received from any insurer arising from any loss, damage or destruct possessing any Collateralized Goods or any proceeds of Collateralized		lized Goods and ai	ny otner p	acyment received as a	result of
All of the collateral described above is intended to be classified as p classified as a fixture, this filing constitutes a fixture filing as to such					
favor of the secured party and secured party's lien thereon constitute				es a purchase money	Obligation III
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14. This FINANCING S	TATEMENT:			
REAL ESTATE RECORDS (if applicable)	covers timber to		s-extracted	collateral X 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 e	<del></del>	·		
(if Debtor does not have a record interest):	Parcel ID:				
Robert Powers	28-10-119-010-0000				
14600 Kilbourn Ave					
Midlothian, IL 60445	This propert	v is located a	at 1460	10 Kilbourn Av	۵
	This property is located at 14600 Kilbourn Ave, Midlothian, IL 60445. Our security interest is in the personal property described in detail in the Collateral				
	section included with this filing.				
	State: IL				
	[ See Exhibit for	Keal Estate ]			
17. MISCELLANEOUS: 80640912-IL-31 25556 - SOLAR MOSAIC Solar M	fesaic, Inc	File with: Cook, IL	165026	249733	

2120012028 Page: 3 of 4

# **UNOFFICIAL COPY**

Ex.

16. Description of real esta.
County: Cook County

Clarks

Office

### **UNOFFICIAL COPY**

Lots 1 and 2 in Owner's Subdivision of the East half of Lot 9 in first-Addition Midlothian Gurdens, being a subdivision of the Northwest quarter of Section 10, Township 36 North, Range 13, East of the Third Principal Meridian, according to the plat thereof recorded July 2, 1926 as document number 9327980, in Cook County, Illinois.

Property of Cook County Clark's Office