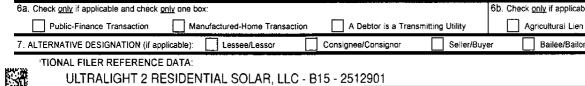
## UNOFFICIAL COPY

## **UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS		naa# 01971	1209	3 Fee \$93.00	
A. NAME & PHONE OF CONTACT AT FILER (optional)		DOC# 51501	,120%	)   CC 4)0.00	
Lien Operations - (800) 786-7693		RHSP FEE:\$9.0	a DDDF	FFF: \$1.00	
B. E-MAIL CONTACT AT FILER (optional)				,	
lien@sunpower.com		KAREN A. YARB	ROUGH		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		COOK COUNTY C	LERK		
l <u> </u>	I	DATE: 08/19/2	021 01	:28 PM PG: 1 OF	2
SunPower Capital, LLC P.O. BOX 841246, Los Angeles, CA 90084-1246	l				
UCC Fixture: COOK, IL					
APN: 19-14-414-017 JUN0	, I				
		THE ADOLE ODA	05 10 50	N 50 W 0 055105 U 05	ou v
· PERTORIO MANGELE I				R FILING OFFICE USE	
		nodity, or abbreviate any part of the fire information in item 10 of the Fire			
1a. ORGANIZATION'S NAME.					
OR 15, INDIVIDUAL'S SURNAME	FIRST PERSONAL	. NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Villa	Lydia				
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
3417 West 60th Place	Chicago		IL	60629	USA
	<del></del>				
2. DEBTOR'S NAME: Provide only one Debtor name (2s or 2b) (use extend of line will not fit in line 2b, leave all of item 2 blank, check here and provide 2s. ORGANIZATION'S NAME		nodity, or abbreviate any part of t rinformation in item 10 of the Fir			
	'				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	ウメ	STATE	POSTAL CODE	COUNTRY
CECUPED PARTICIONALE AND	1050 040000	2 0 0 0		<u> </u>	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU 3a. ORGANIZATION'S NAME	JRED PARTY): Prov	ide only <u>one</u> Secured Party name	e (3a or 3)	D)	
OR OB INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
S. INDIVIDUAL S SOMMANIE	THOTTENOONAL	The state of the s	L	HAE HAME(O)/HHTIAE(O)	
3c. MAILING ADDRESS	СІТҮ		31 41 E	POSTAL CODE	COUNTRY
PO Box 82387	Austin		TX	78708-2387	USA
4. COLLATERAL: This financing statement covers the following collateral:				- 15c.	5 Y
Residential Solar Photovoltaic Equipment which may conta	ain an integrate	ed battery.			<del></del>
For questions or assistance concerning this filing, we urge		w.sunpower.com/life fo	or the f	astest response. To	submit your
request, select Submit Online under refinance or home sal	e section.			(0)	- <del></del>
				9	} Y-/
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				<b>!</b> !	NT EK
					<u></u>



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 Personal Representative

Non-UCC Filing

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

## **UNOFFICIAL COPY**

## **UCC FINANCING STATEMENT ADDENDUM**

10	LLOWINSTRUCTIONS						
	NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if because Individual Debtor name did not fit, check here	line 1b was lef	ft blank				
9a. ORGANIZATION'S NAME							
OR	OR 95. INDIVIDUAL'S SURNAME						
	Villa						
	FIRST PERSONAL NAME						
	Lydia ADDITIONAL NAME(S)/INIT/AL(S)		SUFFIX				
	0			THE ABOVE	SPACE	S FOR FILING OFFIC	CE USE ONLY
10.	DEBTOR'S NAME: Provide (10a or not only only one additional Debtor name or do not omit, modify, or abbreviate any part of the finishers 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	ialling address					
OR	<i>y</i>						
OR	10b. INDIVIDUAL'S SURNAME						
	INDIVIDUAL'S FIRST PERSONAL NAME		· · · · · ·				
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				<del></del>		SUFFIX
10-	MAILING ADDRESS	TCITY -			DTATE	IDOCTAL CODE	COUNTRY
100	. WAILING ADDRESS	GIT			STATE	POSTAL CODE	COUNTRY
11.	☐ ADDITIONAL SECURED PARTY'S NAME QI ☐ ASSIGNO	OR SECUR	EO PARTYS	S NAME: Provide o	niy <u>one</u> na	ame (11a or 11b)	
•	11a. ORGANIZATION'S NAME		77%				
OR	11b. INDIVIDUAL'S SURNAME	FIRST PERS	ONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S	) SUFFIX
110	MAILING ADDRESS	CITY		(Q <sub>4</sub>	STATE	POSTAL CODE	COUNTRY
12	ADDITIONAL SPACE FOR ITEM 4 (Collateral):				1		
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	•				(	),	
	•						
						'C	
	•					Cv	
13.	This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINA	ANCING STATE	MENT:			
15	Name and address of a RECORD OWNER of real estate described in item 16	<u> </u>	ers timber to be co		extracted (	collateral sis filed a	s a fixture filing
	(if Debtor does not have a record interest):	1			EBERH	IART'S SUBD S1.	/2 NW1/4 S
VILLA JOSE  3417 West 60th Place  21.4 S14 T38N R13E  3417 West 60th Place  3417 West 60th Place							
CI	nicago, IL 60629	Chicago,	IL 60629	, <del>e</del>			
	•	соок					
_							
17.	MISCELLANEOUS: ULTRALIGHT 2 RESIDENTIAL SOLAR, LLC - B15	5 - 251290	— <del>—</del> )1				
	CELLINGIAL ELICIDENTIAL OCEARS, ELO " DIS		• 1				