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JCC FINANCING STATEMENT FOLLOW INSTRUCTIONS Recorded at Request of: Sunrun, Inc.		*2130145045*********************************				
A. NAME & PHONE OF CONTACT AT FILER (optional) 855-478-6786		RHSP FEE:59.00 RPRF FEE: 51 00				
B. E-MAIL CONTACT AT FILER (optional)		KAREN A. YARBROUGH				
customercare@sunrun.com	COOK COUNTY CLERK					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	DATE: 10/28/2021 04:05 PM PG: 1 OF 3					
Sunrun, Inc.	7	77.03 PN PG: 1 OF 3				
P.O. Box 981440						
El Paso, TX 72998-1440		,				
El Paso, 17/7.538-1440						
				R FILING OFFICE USE		
	exact, full name; do not omit, m nd provide the Individual Debtor	iodify, or abbreviate any part information in item 10 of the	of the Debtor Financing St	's name); if any part of the II atement Addendum (Form U	CC1Ad)	
1a. ORGANIZATION'S NAME						
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME .	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
Jackson	Bridgette					
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
17028 Judy Ct	Oak Fores	t	IL	60452	USA	
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use name will not fit in line 2b, leave all of item 2 blank, check here are all 2a. ORGANIZATION'S NAME.	e, act iull name; do not omit, m nd pro ide tie l'idividual Debtor					
28	` ()					
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	FIRST PERSONAL NAME		NAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	СІТҮ	CITY		POSTAL CODE	COUNTRY	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE OF ASSIGN	NOR SECURED PARTY): Provi	de orly <u>vie</u> Secured Party n	name (3a or 3t) 		
Sunrun, Inc.		()				
OR 3b, INDIVIDUAL'S SURNAME	FIRST PERSONAL	FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX				
3c. MAILING ADDRESS	CITY	CITY		POSTAL CODE	COUNTRY	
595 Market Street, 29th Floor	San Franc	San Francisco		04105	USA	
4. COLLATERAL: This financing statement covers the following collate	ra):	-				
The collateral described below is located at: 1702				1///		
ALL OF THE DEBTOR'S RIGHT, TITLE AND INTERES BUT NOT LIMITED TO ROOFTOP SOLAR PANELS, E EQUIPMENT, AND ADDITIONS OR REPLACEMENTS WARRANTIES ISSUED WITH RESPECT TO THE REF	LECTRICAL INVERTER OF THE SAME. IN AC	RS, CABLES AND WI	RES, SUP	PORT BRACKETS, R	ELATED	
					s <u>Y</u>	
					6 1	
5 Charle only if applicable and shock and one have Callatered in	Lin a Trust Inna LICCAAd inc	17 and Instructions)	ning edministr	rea by a Department's Decem-	al Pontes contains	
Check only if applicable and check only one box: Collateral is held Check only if applicable and check only one box:	in a Trust (see UCC1Ad, item 1			rec by a Decedent's Person if applicable and check <u>only</u>		
Public-Finance Transaction Manufactured-Home Trans	saction A Debtor is a	Transmitting Utility		tural Lien Non-UCC	rvs V	
7. ALTERNATIVE DESIGNATION (if applicable): X Lessee/Lessor	Consignee/Consigno				nsee/Licensor	
8. OPTIONAL FILER REFERENCE DATA:	Cook				E - //	

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS							
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 left blank						
9a ORGANIZATION'S NAME							
az. Gronitza nord o mane							
	·····						
OR 9b. INDIVIDUAL'S SURNAME							
Jackson							
FIRST PERSONAL NAME							
Bridgette							
ADDITIONAL NAME(S), INITIAL'S)	SUFFIX						
ADDITIONAL MAINE(S), INC. AL S)	561117						
				IS FOR FILING OFFICE			
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name o		ne 1b or 2b of the I	Financing S	Statement (Form UCC1) (use	e exact, full name;		
do not omit, modify, or abbreviate any pair of "ie Dobtor's name) and enter the n	nalling address in line roc						
10a, ORGANIZATION'S NAME							
OR 10b, INDIVIDUAL'S SURNAME							
INDIVIDUAL'S FIRST PERSONAL NAME							
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX		
INDIVIDUAL S ADDITIONAL NAME (S)/INTTAL(S)	4				Joseph M.		
10c. MAILING ADDRESS	TOTTY		ISTATE	POSTAL CODE	COUNTRY		
TUE. MAILING ADDRESS	Cit		SIAIE	POSTAL CODE	COBINICI		
			<u> </u>	<u> </u>			
	OR SECURFU PARTY'S	NAME: Provide	only <u>one</u> n	ame (11a or 11b)			
11a. ORGANIZATION'S NAME							
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
11c, MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY		
		, (A) \(\)			-		
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):				·			
, , , , , , , , , , , , , , , , , , , ,		· ·	0.				
			O.				
			· ·	Vx.			
		-					
				C			
13. X This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14. This FINANCING STATEM	ENT:					
REAL ESTATE RECORDS (if applicable)	covers timber to be cu	_	-extracted	collateral X is filed as	a fixture filino		
15. Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real estate:		0.11.00.00	Z io mad as	a made ming		
(if Debtor does not have a record interest);							
Bridgette Jackson	County of: Cook						
bridgette sackson	Address of 12020 India Co. Oak Farmer II. (A452						
	Address of Real Estate: 17028 Judy Ct, Oak Forest, IL, 60452						
	APN: 2828102066						
	2020102000						
	Legal See Exh	Exhibit A					
	Legal						
	Description:						
17. MISCELLANEOUS:							

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EXHIBIT A

LOT 17 IN JUDY COURT, BEING A SUBDIVISION OF LOTS 12 THROUGH 15, AND THE WEST 330.0 FEET OF LOT 11 IN BLOCK 2 IN ARTHUR T. MC INTOSH AND CO'S SOUTHTOWN FARMS UNIT NUMBER 6, BEING A SUBDIVISION OF THE EAST 1/2 OF THE WEST 1/2 OF SECTION 28, TOWNSHIP 36 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PERMANENT PARCEL NUMBER: 28-28-102-066-0000

WN AS:

OF COOK COUNTY CLOTH'S OFFICE COMMONEY LYOWN AS: 17028 Judy Ct, Oak Forest, IL 60452-4475

Cook County-Jackson