



UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-3	31-3282 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	83753134
Glendale, CA 91209-9071	ILIL
	FIXTURE I
Flewith: Cook, IL	

Doc# 2134433006 Fee ⊈93 (Doc#	2134433086	Fee	\$ 93	Йľ
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RHSP FEE:59.00 RPRF FEE: \$1.00

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 12/10/2021 10:42 AM PG: 1 OF 2

	EBTOR'S NAME: Provide or y on_ Pebtor name (1a or 1b) (use exact, ful me will not fit in line 1b, leave all of iter 11' lank, check here and provide	•		, , , ,	
	1a, ORGANIZATION'S NAME				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	Franco	Joanne			
1c. N	MAILING ADDRESS	СІТҮ	STATE	POSTAL CODE	COUNTRY
16	4 Alcott Ct	Elgin	IL.	60120	USA
	EBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exa. 1. fr. me will not fit in line 2b, leave all of item 2 blank, check here and provide				
	2a. ORGANIZATION'S NAME	C			
OR	2b. INDIVIDUAL'S SURNAME	FIRST PENSO VAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. N	AJLING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3. \$	ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC	URED PARTY): Provide only one Secure	Party name (3a or 3	D)	
ſ	3a. ORGANIZATION'S NAME		9.		
	Connexus		-//		
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)INITIAL(S)	SUFFIX
3c. N	AAILING ADDRESS	CITY	STAT &	F OSTAL CODE	COUNTRY
60	1 12th Street, Suite 325	Oakland	CA	54807	USA

4. COLLATERAL: This financing statement covers the following collateral:

The collateral includes the following, whether now owned or hereafter acquired, whether now existing or hereafter arising, and wherever located:

- 1. All solar panels, inverters, battery storage, hot water solar systems, racking systems, wiring, electrical and mechanical connections, metering, monitoring and/or other distributed generation interconnect equipment (collectively, "Solar Equipment") and home improvement products (together with the Solar Equipment, "Purchased Goods") excluding Fixtures (as defined in Article 9 of the UCC), if any (such Purchased Goods which excludes Fixtures are referred to as "Collateralized Goods");
- 2. All accessions, attachments, accessories, tools, parts, supplies, replacements of and additions to any Collateralized Goods;
- 3. All proceeds from warranty claims related to the Collateralized Goods, the home improvement agreement between the debtor and solar contractor ("Home Improvement Agreement") and, if debtor has received an operations and maintenance loan, the operations and maintenance agreement between the debtor and its operations and maintenance contractor ("Operations and Maintenance Agreement");
- 4. All rebates and incentives that are payable as a result of installing the Collateralized Goods except for such rebates and incentives which have been assigned to debtor's solar contractor or operations and maintenance contractor;

5. All debtor's rights, title, interes	ts, and remedies under all ag	reements, statements and	other docume	ntation relating to the (Collateralized Goods 4
5. Check only if applicable and check or	nly one box: Collateral isheld in a	Trust (see UCC1Ad, item 17 and	d Instructions)	being administered by a De	cedent's Personal Representative
6a. Check only if applicable and check	only one box:			6b. Check only if applicable	e and check <u>only</u> one box:
Public-Finance Transaction	Manufactured-Home Transact	ion A Debtor is a Transn	nitting Utility	Agricultural Lien	Non-UCC Filling
7. ALTERNATIVE DESIGNATION (if ap	plicable): Lessee/Lessor	Consignee/Consignor	Seller/Buye	r Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DAT 83753134	ra: 207641			366931	

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UNOFFICIAL COPY

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS				_			
9. NAME OF FIRST DEBTOR; Same a	s line 1a or 1b on Financing	Statement; if line 1b was left	blank	1			
because Individual Debtor name did	not fit, check here						
9a. ORGANIZATION'S NAME							
OR 96. INDIVIDUAL'S SURNAME							
Franco			i				
FIRST PERSONAL N' MÊ Joanne				1			
ADDITIONAL NAME(SVINITI (L(S)			SUFFIX	ł			
)	Ó_			THE ABOVE	E SPACI	E IS FOR FILING OFF	ICE USE O
. DEBTOR'S NAME: Provide (10a	or iobjecto o <u>ne</u> additional	Debtor name or Debtor name	that did not fit in				
do not omit, modify, or abbreviate any	y part of the Deptor's name) a	and enter the mailing address	in line 10c				
10a. ORGANIZATION'S NAME	0.0						
R 105. INDIVIDUAL'S SURNAME							
INDIVIDUAL'S FIRST PERSONAL	. NAME	0,					
INDIVIDUAL'S ADDITIONAL NAM	E(S)/INITIAL(S)	77					SUFFIX
		<u> </u>				<u> </u>	
Oc. MAILING ADDRESS		CITY),		STATE	POSTAL CODE	COUNTR
. ADDITIONAL SECURED PA	ARTY'S NAME OF	ASSIGNOR SECURI	ED FAR IY'S I	NAME: Provide only	one nan	 ne (11a or 11b)	
11a. ORGANIZATION'S NAME	-		77	<u> </u>	_	· · · · · · · · · · · · · · · · · · ·	
11b. INDIVIDUAL'S SURNAME		FIRST PERS	ONAL NAME	<u> </u>	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX
						, , , , ,	
1c. MAILING ADDRESS		CITY	<u> </u>	7/	STATE	POSTAL CODE	COUNTR
	12.00				6		
 ADDITIONAL SPACE FOR ITEM 4 noticely must be about the state of the st		greement and Operation	ons and Maint	tenance Agreeme	ent); and		
. All consideration received fro	m the collection, sale c	r other disposition of ar	ny property th	at constitutes Co	llaterali:	zer', Grads, includina	anv pavm
eceived from any insurer arisin ossessing any Collateralized C	ig from any loss, damag	ge or destruction of any	Collateralize	d Goods and any	other p	payment received as	result of
• .	• •					Ö	
Il of the collateral described at assified as a fixture, this filing	ove is intended to be constitutes a fixture filing	classified as personal pr ng as to such collateral.	operty, but to The collatera	o the extent that a al described abov	iny port /e secui	ion of such collateral res a purchase mone	is or becor / obligation
vor of the secured party and s	secured party's lien ther	eon constitutes a purch	nase money s	ecurity interest.			
This FINANCING STATEMENT. REAL ESTATE RECORDS (if a			NANCING STAT ers timber to be	_	extracted	collateral 🔀 is filed as	a flyture filin
. Name and address of a RECORD (tion of real estat		JAN BOICH	Complete A A 12 Hear go	a made mill
(if Debtor does not have a record in oanne Franco	terest);	Parce					
64 Alcott Ct		06-17	'-113-006	6-0000			
Elgin, IL 60120			- NIVA/A C+	17 TAAN DO	ነበር ሳ	D	•
J : , : : : :				17 T41N R0	J9⊏ 3	Г	
		State		Carraki			
		Coun	ty: Cook	County			
'. MISCELLANEOUS: 83753134-IL-31	25556 - SOLAR MOSAIC	Connexus		File with: Cook, IL	207641	366931	