# UNOFFICIAL COPY

Record at the request of and when recorded return to: GoodLeap, LLC

### loc# 2302508089 Fee \$93.00

#### **UCC FINANCING STATEMENT**

**FOLLOW INSTRUCTIONS** 

B. E-MAIL CONTACT AT FILER (optional)	
filings@goodleapsupport.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
<del>                                   </del>	— <sub>1</sub>
GoodLeap, LLC	I
PO Box # 981440	
El Paso, TX 79398- 1440	
	1

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

HSP FEE:\$9.00 RPRF FEE:	\$1.00	
AREN A. YARBROUGH		
OOK COUNTY CLERK		
MATE: 01/25/2023 02:51 PM	PG:	1

OF 2

	THE AB	OVE SPACE IS FO	OR FILING OFFICE USE	ONLY
DEBTOR'S NAME: Provide on', or a Debtor name (1a or 1b) (use name will not fit in line 1b, leave all of the blank, check here are	exact, full name; do not omit, modify, or abbreviate nd provide the Individual Debtor information in item	any part of the Debto 10 of the Financing S	r's name); if any part of the I tatement Addendum (Form U	ndividual Debtor's (CC1Ad)
1a, ORGANIZATION'S NAME				· · · · · · · · · · · · · · · · · · ·
Aguayo	FIRST PERSONAL NAME Erick	ADDITIO	ADDITIONAL NAME(SYINITIAL(S)	
1c. MAILING ADDRESS 2947 N Meade Ave	Chicago	STATE IL	POSTAL CODE 60634	COUNTRY
	vac., full name; do not omit, modify, or abbreviate ad or vide the individual Debtor information in item	any part of the Debto 10 of the Financing St	r's name); if any part of the Ir latement Addendum (Form U	ndividual Debtor's CC1Ad)
2a. ORGANIZATION'S NAME OR	70	· ·		
25. INDIVIDUAL'S SURNAME	FIRS TEPSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN  3a. ORGANIZATION'S NAME	NOR SECURED PARTY): Provide cal, une Secured	Party name (3a or 3t	b)	
GoodLeap, LLC	C			
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY .	STATE	POSTAL CODE	COUNTRY
8781 Sierra College Boulevard	Roseville		95746	USA

All of the debtors right, title and interest in the Photovoltaic Solar Energy Equipment or Energy Storage/Battery Equipment (If any), including but not limited to rooftop solar panels, solar roofing materials, wall mounted batteries, stand alone batteries, inverters, cables and wires, support brackets, roof mounted or ground mounted racking systems, related equipment, and additions or replacements of the same. In addition, the security interest includes all warranties issued with respect to the referenced collateral

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x:	•

5. Check only if applicable and check only one box: Collateral isheld in a Trust (see UCC1Ad, item 17 and Instructions)bein	g administered by a Decedent's Personal Representative
6a. Check only if applicable and check only one box:	Check <u>only</u> if applicable and check <u>only</u> one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer	Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	
Acct # 2216105850	

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### UCC FINANCING STATEMENT ADDENDUM

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if	f line 1b was left blank				
because Individual Debtor name did not fit, check here  9a. ORGANIZATION'S NAME					
ON ON ON AND THE STATE OF THE S					
OR 96, INDIVIDUAL'S SURNAME					
Aguayo					
FIRST PERSONAL VALUE					
Erick					
ADDITIONAL NAME(G)/IN. (1) L(S)	SUFFIX				
		THE ABOVE	SPACE IS FOR	R FILING OFFICE	USE ONLY
10. DEBTOR'S NAME: Provide (10a r '0) ) only one additional Debtor name or	Debtor name that did not fit in	line 1b or 2b of the i	Financing Stateme	nt (Form UCC1) (use	exact, full name
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the m	nailing address in line 10c			<u> </u>	<del> </del>
S. S					
OR 10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME			<del></del>	<del></del>	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				<del></del>	SUFFIX
c. MAILING ADDRESS	CIT		STATE POST	AL CODE	COUNTRY
1. ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO	OR SECURED PARTY	S NAME: Provide	only <u>one</u> name (11	a or 11b)	
11a, ORGANIZATION'S NAME	TO x				
R 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	<u> </u>	T	· <u> </u>	
TO MONOCOLO CONTINUE	FIRST PERSONAL NAME		ADDITIONAL NA	ME(\$)/IN/TIAL(\$)	SUFFIX
c. MAILING ADDRESS	CITY		STATE POST	AL CODE	COÚNTRY
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2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		(EAIT.	ŚO.	c	
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	14. This FINANCING STATE		Ś O,	S.C.O.	fortune (Co.
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  3. X This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable)			ŚO.		fixture filing
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  3. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)  5. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	14. This FINANCING STATE	ut covers as-	Ś O,	S.C.O.	fixture filing
D. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	14. This FINANCING STATE  covers timber to be co  16. Description of real estate  County of: Cook	ut covers as-	Ś O,	S.C.O.	fixture filing
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2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  3.	14. This FINANCING STATE!    covers timber to be of 16. Description of real estate     County of: Cook     Address of     Real Estate: 2947 N	Meade Ave, Chic	extracted collateral	is filed as a	
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