Doc#, 2406723080 Fee: S107.00 KAREN A. YARBROUGH COOK COUNTY CLERK'S OFFICE Date 3/7/2024 12:00 AM Pg: 1 of 4

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-3	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	1		
Lien Solutions P.O. Box 29071	97606956			
Glendale, CA 91209-9071	ILIL			
	FIXTURE _I			
File with: Cook, IL			PACE IS FOR FILING OFFIC	
1a. INITIAL FINANCING STATEMENT FLE NUMBER 2304655059 2/15/2023 CC /L Cuok		or recorded) in the RE	FEMENT AMEND ME NT is to be FAL ESTATE RECORDS Addendum (Form UCC3Ad) <u>and</u> provi	
2. X TERMINATION: Effectiveness of the Financing Statement	nt identified above is terminated with	n respect to the security interest	(s) of Secured Party authorizing	this Termination
ASSIGNMENT (full or partial): Provide name or Assigner For partial assignment, complete items 7 and 9 and a so			f Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statem continued for the additional period provided by applicable		the security interest(s) of Secur	ed Party authorizing this Continu	ation Statement is
5. PARTY INFORMATION CHANGE:	0			
Check one of these two boxes:	AND Check (ne c thr se three box CHANC _ terms and/or a item 6a o 6b; and item			name: Give record name
This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Info			b, <u>and</u> item 7cto be del	eted in item 6a or 6b
6a. ORGANIZATION'S NAME	official official office of provide of by office	hame (od or ob)		
OR CO. INDIVIDUALIS SUDMANE		<u> </u>		
6. INDIVIDUAL'S SURNAME Williams	FIRST PERSON. Tonzell	AL-NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment	t or Party Information Change - provide only	one name (va or 7b) (un cont, full name	ne; do not omit. modify, or abbreviate any	part of the Debtor's name)
7a. ORGANIZATION'S NAME		(/		
OR 7b. INDIVIDUAL'S SURNAME		<u> </u>	Z ,	
INDIVIDUAL'S FIRST PERSONAL NAME		•	5	
INDIVIDUAL'S ADDITIONAL NAME(SVINITIAL(S)				SUFFIX
INDIVIDUAL O ADDITIONAL TAMELOJIMITALLOJ			175	COLLIX
7c. MAILING ADDRESS	ату		STATE POSTAL CODI	COUNTRY
COLLATERAL CHANGE: Also check one of these for Indicate collateral:	our boxes: ADD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN collateral

9, NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)

FIRST PERSONAL NAME



SUFFIX

ADDITIONAL NAME(S)/INITIAL(S)

If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: Williams, Tonzell

276171

9a, ORGANIZATION'S NAME Solar Mosaic LLC

9b. INDIVIDUAL'S SURNAME

OR

UNOFFICIAL COPY

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS	ADDENDON					
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amend	ment form					
2304655059 2/15/2023 CC IL Cook 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Am						
12a. ORGANIZATION'S NAME						
Solar Mosaic LLC						
OR 12b. INDIVIDUAL'S SURNAME						
FIRST PERSONAL NAME						
ADDITIONAL NAME(S)/INITIAL(S)						
100		THE ABOVE SP	ACE IS FOR FILING OFFICE US	E ONLY		
 Name of DEBTOR on related financing state in a retylvame of a current Debtor of one Debtor name (13a or 13b) (use exact full name do not omit, modify, or ab 	record required for indexing breviate any part of the Debt	purposes only in some or's name); see Instruct	filing offices - see Instruction item tions if name does not fit	13): Provide only		
13a. ORGANIZATION'S NAME	<u> </u>	, , , , , , , , , , , , , , , , , , ,				
OR HOLINDIAN IN CHIPMAN						
OR 13b. INDIVIDUAL'S SURNAME Williams	FIRST PERSONAL NAME Tonzell	 	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):						
Debtor Name and Address: Williams, Tonzell - 3711 Edgewater Dr , Hazel Crest, IL 60429	/_					
Secured Party Name and Address: Solar Mosaic LLC - 601 12th Street, Suite 325, Oakland, CA 94607	Ö					
	⁴ Ox					
		1/7				
Secured Party Name and Address: Solar Mosaic LLC - 601 12th Street, Suite 325 , Oakland, CA 94607						
			Ö			
15. This FINANCING STATEMENT AMENDMENT:	17. Descript	ion of real estate:				
covers timber to be cut covers as-extracted collateral in item 17		•	ated at 3711 Edge	•		
(if Debtor does not have a record interest):	l l	•	129. Our security ir			
Tonzell Williams			perty described in			
3711 Edgewater Dr Hazel Crest, IL 60429	State:		on included with th	iis tiiing.		
Hazel Olest, IL 00429	· · ·	y: Cook Cour	ntv			
	Jooding	y. 000K 000K	ity			
	Parcel	ID:				
	 See Ex	hibit for Real Esta	ite]			
18 MISCELLANECUS: 97608968-II-31 25556 - SOLAR MOSAIC Solar M	losaic II C		76171 496956			

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Debtor: Williams, Tonzell

e.

17. Description of real es.

31-02-109-007-0000



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Order No.:

20033286LP

LEGAL DESCRIPTION

LOT 114 IN DYNASTY LAKES ESTATES UNIT 3, BEING A SUBDIVISION OF PART OF THE NORTHWEST 1/4 OF SECTION 02, TOWNSHIP 36 NOSTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.