LOFFICIAL DOCUME Record at the request of and when recorded return to: Loanpal, LLC UCC FINANCING STATEMENT **FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) B. E-MAIL CONTACT AT FILER (optional) filings@loanpalsupport.com GINA PIMENTEL 2021-032094 C. SEND ACKNOWLEDGMENT TO: (Name and Address) RECORDER STATE OF INDIANA Loanpal, LLC LAKE COUNTY 3:26 PM 2021 Apr 14 PO Box # 981440 FILED FOR RECORD El Paso, TX 79998- 1440 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S NAME: Provide only and Debtor name (1s or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check hero and provide the Individual Debtor Information in item 10 of the Financing State eant Addendum /Form LICC1Ad) 1a. ORGANIZATION'S NAME OR 16. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SVINITIAL(S) SHEERY Brown Jesse 1c. MAILING ADDRESS CITY POSTAL CODE COUNTRY 3950 West 231St Avenue Lowell IN 46356 IISA 2. DEBTOR'S NAME: Provide only and Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 2b, leave all of item 2 blank, check here and pr te the Individual Debtor Information in Item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SVINITIAL(S) 2c. MAILING ADDRESS STATE IPOSTAL CODE COUNTRY USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 30. ORGANIZATION'S NAME Loanpal, LLC OR 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAM ADDITIONAL NAME(SYINITIAL(S) - SUFFIX

All of the debtor's 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.

CITY

Roseville

3c. MAILING ADDRESS

8781 Sierra College Boulevard

4. COLLATERAL: This financing statement covers the following collaters

CV# 125197

USA

STATE POSTAL CODE

95746

CA

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
6a. Check only if applicable and check only one box:	6b. Check only if applicable and check only 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/Buy	er Baltee/Baltor Licenses/Licensor
8. OPTIONAL FILER REFERENCE DATA:	C) -
Acct # 2107039768	D35100

NOT AN OFFICIAL DOCUMENT

UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS	ı				
NAME OF FIRST DEBTOR: Same as tine 1s or 1b on Financing Statement; because individual Debtor name did not fit, check here.	if (ine 1b was left blank	7			
9s. ORGANIZATION'S NAME		1			
		1			
Bb. INDIVIDUAL'S SURNAME Brown]			
FIRST PERSONAL NAME Jesse					
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE	SPACE	S FOR FILING OFFICE	USE ONLY
 DEBTOR'S NAME: Provide (10s or 10b) only one additional Debtor name of do not omit, modify, or abbreviate any peri of the Debtor's name) and enter the r 	r Debtor name that did not fit mailing address in line 10c				
10a. ORGANIZATION'S NAME					
10b. INDIVIDUAL'S SURNAME					ev.
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)	,				SUFFIX
c. MAILING ADDRESS	COTY		STATE	POSTAL CODE	COUNTRY
ADDITIONAL SECURED PARTY'S NAME of ASSIGN	OR SECURED PARTY	'S NAME: Provide	only <u>one</u> na	me (11a or 11b)	
11s. ORGANIZATION'S NAME	0.				
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS	ату	71-	STATE	POSTAL CODE	COUNTRY
ADDITIONAL SPACE FOR ITEM 4 (Collisteral):		70			-1
			CO	0_	**
This FINANCING STATEMENT is to be filled [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	14. This FINANCING STATE covers timber to be 16. Description of real estate	cut covers as-	extracted c	ollateral X is filed as	a fixture filing
(if Doblor does not have a record interest):	County of: LA				
	Address of Real Estate: 3950	West 231St Avenue	t, Lowell,	IN, 46356	
	APN: 452	43020000200	00007		
MISCELLANEOUS.					

NOT AN OFFICIAL DOCUMENT

FXHIBITS-A

PARCEL 1: The South Half of the West Half of the West Half of the Northwest Quarter of the Northeast Quarter of Section 30, Township 32 North, Range 8 West of the Second Principal Meridian, in Cedar Creek Township, in Lake County, Indiana.

PARCEL 2: The North Half of the West Half of the West Half of the Northwest Quarter of the Northeast Quarter of Section 30, Township 32 North, Range 8 West of the Second Principal ABA, IN. 7.5.

TO DORTH OF LAKE COUNTY RECORDER. Meridian, in Cedar Creek Township, in Lake County, Indiana; 75-24-30-200-001.000-007

IN LAKE BROWN