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BY: JAS
PG #: 3

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
GINA PIMENTEL
RECORDER

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Online Dept. - 888-507-4593
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) FIRST CORPORATE SOLUTIONS INC. 914 S STREET SACRAMENTO, CA 95811 UCCI-787958 Lake County, IN

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. **DEBTOR'S NAME:** Provide only one Debtor name (1a 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 Debtors name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
ORTEGA	JOSE			
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
7350 Arizona Avenue	Hammond	IN	46323	USA

2. **DEBTOR'S NAME:** Provide only one 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's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. **SECURED PARTY'S NAME (or NAME OF ASSIGNEE OF ASSIGNOR SECURED PARTY):** Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
Technology Credit Union				
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2010 North First Street	San Jose	CA	95131	USA

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

ALL OF THE DEBTOR'S RIGHT, TITLE AND INTEREST IN PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT (IF ANY), INCLUDING BUT NOT LIMITED TO SOLAR INTEGRATED ROOF, ROOFTOP SOLAR PANELS, ELECTRICAL INVERTERS, CABLES AND WIRES, SUPPORT BRACKETS, RELATED EQUIPMENT, MONITORING EQUIPMENT, SMART METERS AND ADDITIONS OR REPLACEMENTS OF THE SAME. IN ADDITION, THE SECURITY INTEREST INCLUDES ALL WARRANTIES ISSUED WITH RESPECT TO THE REFERENCED COLLATERAL, ANY RENEWABLE ENERGY OR CARBON CERTIFICATES OR CREDITS (REFERRED TO, AMONG OTHER THINGS, AS "SRECS"), ANY RENEWABLE ENERGY PRODUCTION INCENTIVES ("PERFORMANCE-BASED INCENTIVES"), AND ANY OTHER ECONOMIC BENEFITS RELATED TO INCENTIVES TO SUPPORT RENEWABLE ENERGY

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:
 Public Finance Transaction Manufacture-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:
 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:

UCCI-787958|40207

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME	
OR	
9b. INDIVIDUAL'S SURNAME	
ORTEGA	
FIRST PERSONAL NAME	
JOSE	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

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10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC-1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME					
OR					
10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX	
10c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME					
OR					
11b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
11c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

PRODUCTION THAT BORROWER MAY RECEIVE OR BE ENTITLED TO AS A RESULT OF THE PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT.

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

covers timber to be cut covers as-extracted collateral is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 18 (if Debtor does not have a record interest):

16. Description of real estate:

ORTEGA JOSE G / ORTEGA ALMA

PROPERTY LOCATED IN COUNTY OF LAKE CITY OF HAMMOND STATE OF IN; COMMONLY KNOWN AS 7350 ARIZONA AVENUE, HAMMOND, IN 46323
APN: 45-07-16-202-020.000-023
For title reference deed recorded 03/19/2009 with the Lake County Recorder, Instrument No. 2009 017456.
LEGAL DESCRIPTION: See Exhibit A.

17. MISCELLANEOUS.

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EXHIBIT A

Lots 29, 30 and the South 10.0 feet of Lot 31 in Block 4 in J.R. Brant's Parkview Addition, in the City of Hammond, as per plat thereof, recorded in Plat Book 20 page 21, in the Office of the Recorder of Lake County, Indiana.

Property of Lake County Recorder