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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
 CSC 1-800-858-5294

B. E-MAIL CONTACT AT FILER (optional)
 SPRFiling@csGLOBAL.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

2297 10838
 CSC
 801 Adlai Stevenson Drive
 Springfield, IL 62703

Filed In: Indiana (Lake)

GINA PIMENTEL
 RECORDER
 2022-012792

STATE OF INDIANA
 LAKE COUNTY
 FILED FOR RECORD
 9:21 AM 2022 Apr 12

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 Debtor's 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 UCC1A6)

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S SURNAME Brown	FIRST PERSONAL NAME Shedrick	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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1c. MAILING ADDRESS 5088 Roosevelt Place	CITY Gary	STATE IN	POSTAL CODE 46408	COUNTRY USA
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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 UCC1A6)

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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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
All In Credit Union

OR

3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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3c. MAILING ADDRESS P.O. Drawer 8	CITY Daleville	STATE AL	POSTAL CODE 36322	COUNTRY USA
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4. COLLATERAL: This financing statement covers the following collateral:
7,400,000 kW photovoltaic solar energy system, consisting of: Silfab modules, SolarEdge inverter AND ALL OTHER PRODUCTS, PROCEEDS AND ATTACHMENTS.

Clk# 2409834

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1A4, 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 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 Bailor/Bailor Licensee/Licensee

8. OPTIONAL FILER REFERENCE DATA: 2297 10838

NOT AN OFFICIAL DOCUMENT

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	
9b. INDIVIDUAL'S SURNAME	
Brown	
FIRST PERSONAL NAME	
Shedrick	
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 UCC1) (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				
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				
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):

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 16 (if Debtor does not have a record interest):

16. Description of real estate:

A PARCEL OF LAND LOCATED IN THE STATE OF IN, COUNTY OF LAKE, WITH A SITUS ADDRESS OF 5088 ROOSEVELT PL, GARY IN 46408-4254 C051 CURRENTLY OWNED BY BROWN SHEDRICK / BROWN LORETTA D HAVING A TAX ASSESSOR NUMBER OF 45-08-32-401-013.000-001 AND BEING THE SAME PROPERTY MORE FULLY DESCRIBED AS WOODS PARK UNIT NO.2 L. 14

17. MISCELLANEOUS: