NOT AN OFFICIAL DOCUMENT

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS		
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294		
B. E-MAIL CONTACT AT SUBMITTER (optional)		
SPRFiling@cscglobal.com		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		
2643 38533	\neg	
CSC	I	
801 Adlai Stevenson Drive	Filed In: Indiana	
Springfield, IL 62703	(Lake)	
	(Lake)	
_	_	
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION		

2023-529661 09/11/2023 02:11 PM TOTAL FEES: 25.00 BY: JAS PG #: 2 RECORDED AS PRESENTED STATE OF INDIANA LAKE COUNTY FILED FOR RECORD GINA PIMENTEL RECORDER

Springfield, IL 62703	Filed In: Indiana (Lake)			
SEE BELOW FOR SECURED PARTY CONT	ACT INFORMATION	THE ABOVE SPA	CE IS FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2021-062585 10/07/2021	1b	This FINANCING STATEME (or recorded) in the REAL E (Form UCC3Ad) and provide	NT AMENDMENT is to be filed [for reo STATE RECORDS, Filer: attach Amend a Debtor's name in item 13.	ord] iment Addendum
2. TERMINATION: Effectiveness of the Firancing Statement	identified above is terminated with respec	t to the security interest(s) of Sec	ured Part(y)(ies) authorizing this Termin	sation Statement
ASSIGNMENT: Provide name of Assignee in Item 7a or 7 For partial assignment, complete Items 7 and 9, check ASSIC	b, <u>and</u> address of Assignee in item 7c and BN Collateral box in Item 8 and describe th	name of Assignor in item 9 ne affected collateral in item 8		
CONTINUATION: Effectiveness of the Financing Stateme additional period provided by applicable law	nt identified above with respect to the sec	urity interest(s) of Secured Party	authorizing this Continuation Statement	is continued for the
PARTY INFORMATION CHANGE: Check one of these two boxes: This Change affects Debtor or Secured Party of record	AND Check one of these three boxes CHANGE name and/or add	ress: CompleteADD nam	re: Complete item DELETE name	: Give record name intem 5a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party	Information Change - provide only one na	ame (6a or 6b)		
6a. ORGANIZATION'S NAME				
БЬ. INDIVIDUAL'S SURNAME Giglio	FIRST PERSONAL Macus	NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assign	ment or Party Information Change - provide only one	name (7a or 7b) (use exact, full name; d	o not omit, modify, or abbreviate any part of the D	lebter's name)
7a. ORGANIZATION'S NAME		77%		
7b. INDIVIDUAL'S SURNAME		7		
INDIVIDUAL'S FIRST PERSONAL NAME		7)	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		0	C	SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY

	9a. ORGANIZATION'S NAME All In Credit Union			
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10.	OPTIONAL FILER REFERENCE DATA:		I	2643 3853

ADD 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)

8.510000 kW photovoltaic solar energy system, consisting of: Silfab modules, SolarEdge inverter AND ALL OTHER

DELETE collateral

RESTATE covered collateral

*Check ASSIGN COLLATERAL only if the assignee's power to amend the record is limited to certain collateral and describe the collateral in Section 8

ASSIGN* collateral

Check only one box:

PRODUCTS, PROCEEDS AND ATTACHMENTS.

COLLATERAL CHANGE:

Indicate collaterat:

NOT AN OFFICIAL DOCUMENT

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS	JE1100111				
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment for 2021-062585 10/07/2021	m				
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment	t				
12a. ORGANIZATION'S NAME	KATH				
All In Credit Union					
OR 12b INDIVIDUAL'S SURNAME					
126. INDIVIDUAL'S SURNAME					
FIRST PERSONAL NAME					
ADDITIONAL NAME(S)INITIAL(S)	SUFFIX				
100			SPACE IS FOR FILING		
13. Name of DEBTOR on related financing statement (Name of a current Debtor of record record record name (13a or 13b) (use exact, full rame; do not omit, modify, or abbreviate any part of the control of the contro	quired for indexing pu of the Debtor's name)	rposes only in some to s; see Instructions if no	iling offices - see Instructions ame does not fit	n item 13): Pr	ovide only
13a. ORGANIZATION'S NAME					
	RSONAL NAME		ADDITIONAL NAME(S)/IN	IITIAL(S)	SUFFIX
14. ADDITIONAL SPACE FOR (CHECK ONE BOX): ITEM 8 (Collateral)	OR OTH	ER INFORMATION	(Please Describe)		
14. ADDITIONAL SPACE FOR (CHECK ONE BOX): IT IT IT IS (Collatoral): 0 15. The FINANCING STRYEMENT AMENOMENT:	OHN	PO	Coro		
15. This PRINACING STATEMENT AMENDMENT:	2, Block CITY OF RECORI	3, A PLANNE WHITING, A D PLAT BOO	LAKE FRONT (ED UNIT. DEVE AS PER PLAT T OK 101, PAGE 2: R OF LAKE COU	LOPMEN HEREOF 5, IN THI	NT IN THE ; E OFFICE
18. MISCELLANEOUS:					