

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. E-MAIL CONTACT AT FILER (optional)

Record at the request of and when recorded return to:

FOLLOW INSTRUCTIONS

Loanpal, LLC **UCC FINANCING STATEMENT**

2020-009478 Klamath County, Oregon



08/03/2020 01:11:49 PM

Fee: \$87.00

	filings@loanpalsupport.com					
C.	SEND ACKNOWLEDGMENT TO: (Name and Address)		1			
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l	Loanpal, LLC					
	PO Box 4387					
	Portland, OR 97208					
١.						
	· · · · · · · · · · · · · · · · · · ·		THE ABOVE SP	ACE IS FO	R FILING OFFICE USE	ONLY
	DEBTOR'S NAME: Provide only one Debtor name (1e or 1b) (use exact, full name will not fit in line 1b, leave all of item 1 blank, check here and provide		modify, or abbreviate any part of or information in item 10 of the F			
	1a. ORGANIZATION'S NAME					
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONA	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	Lake	Johnie	e i i wie			Jr
1c.	MAILING ADDRESS	CITY	•	STATE	POSTAL CODE	COUNTRY
	122 Bryant Ave	KLAMA	TH FALLS	OR	97603-5016	USA
	name will not fit in line 2b, leave all of item 2 blank, check here and provide 2a. ORGANIZATION'S NAME		or information in item 10 of the F		·	<u> </u>
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL 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 SEC	URED PARTY): Pro	wide only one Secured Party na	me (3a or 3t))	
	3a. ORGANIZATION'S NAME		, , , , , , , , , , , , , , , , , , , ,	•	·	
	Loanpal, LLC					
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3c.	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8781 Sierra College Boulevard		Roseville		CA	95746	USA
4. (COLLATERAL: This financing statement covers the following collateral:					
	All of the debtor's right, title and interest in the Photovoltai but not limited to rooftop solar panels, solar roofing materia brackets, roof mounted or ground mounted racking systems security interest includes all warranties issued with respect t	als, wall mount s, related equip	ed batteries, stand alone ment, and additions or r	batteries,	inverters, cables and v	vires, support

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	being administered by a Decedent's Personal Representative
8a. 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 X Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignes/Consignor Seller/Buye	er Bailes/Bailor Licenses/Licensor
8. OPTIONAL FILER REFERENCE DATA:	
Acct # 2002024514	

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 Lake FIRST PERSONAL NAME Johnie ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Jr THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 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 OR 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME SUFFIX INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) POSTAL CODE COUNTRY 10c. MAILING ADDRESS STATE CITY ADDITIONAL SECURED PARTY'S NAME OF ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11s. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY 11c. MAILING ADDRESS CITY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. X 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 X is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): County of: KLAMATH Johnie Lake Jr Real Estate: 5122 Bryant Ave, KLAMATH FALLS, OR, 97603-5016 APN: R512056 Reference document 2018-0004549 for the legal description of this property

17. MISCELLANEOUS: