

2021-018330 Klamath County, Oregon

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS					Fee: \$92.00	AW
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-33	1-3282 Fax: 8	18-662-4141				
B. E-MAIL CONTACT AT FILER (optional) uccfilingretum@wolterskluwer.com						
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 49471 - Launch Servicing.						
Lien Solutions	83863285					
P.O. Box 29071		•				
Glendale, CA 91209-9071	OROF					
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File with: Klamath, OR			THE ABO	VE SPACE IS F	OR FILING OFFICE US	SE ONLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b)) (use exact, full n	ame; do not omit, m	odify, or abbreviate ar	ny part of the Debto	r'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 th	e Individual Debtor	information in item 10	of the Financing St	atement Addendum (Form l	JCC1Ad)
1a. ORGANIZATION'S NAME						
OR 1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME		ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
PIZANO		ESTEBAN				
1c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
690 Miller Island Road		Klamath Falls		OR	97603	USA
name will not fit in line 2b, leave all of item 2 blank, check here 2a. ORGANIZATION'S NAME	and provide th	e Individual Debtor	information in item 10	of the Financing St	atement Addendum (Form U	JCC1Ad)
OR 2b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME		ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
2c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of AS	SSIGNOR SECUP	RED PARTY): Provid	de only <u>one</u> Secured F	Party name (3a or 3	b)	
3a. ORGANIZATION'S NAME						
EnerBankUSA OR 3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL I	10.045	LABBITIO	DNAL NAME (O) (INITIAL (O)	SUFFIX
30. INDIVIDUALS SURIVAINE		FIRST FERSONALT	VAIVIE	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
3c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
1245 Brickyard Road, Suite 600		Salt Lake City	1	UT	84106	USA
4. COLLATERAL: This financing statement covers the following of PURCHASE MONEY SECURITY INTEREST IN SOLD PHOTOVALTAIC SOLAR ENERGY EQUIPMENT (IF ELECTRICAL INVERTERS, MICROINVERTERS OR AND ADDITIONS OR REPLACEMENTS OF THE SAI RESPECT TO THE REFERENCED COLLATERAL.	AR PRODUC [*] ANY), INCLU POWER OPT	DING BUT NOT IMIZERS, CAB	LIMITED TO RC LES AND WIRES	OFTOP OR G , SUPPORT BI	ROUND MOUNT SOL RACKETS, RELATED	AR PANELS, EQUIPMENT,
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 administe	ered by a Decedent's Perso	nal Representative

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 <u>only</u> if applicable and check <u>only</u>	6b. Check only if applicable and check only one box:								
Public-Finance Transaction	Manufactured-Home Transaction	A Debtor is a Transmitt	ting Utility	Agricultural Lien	Non-UCC Filing				
7. ALTERNATIVE DESIGNATION (if applicat	ble): Lessee/Lessor	Consignee/Consignor	Seller/Buye	r Bailee/Bailor	Licensee/Licensor				
8. OPTIONAL FILER REFERENCE DATA:									
83863285 Lo	anID 203257			LenderCode ENRBK2					

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 **PIZANO** FIRST PERSONAL NAME **ESTEBAN** ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 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 SURNA**M**E INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS POSTAL CODE COUNTRY CITY ADDITIONAL SECURED PARTY'S NAME 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 POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 14. This FINANCING STATEMENT: 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 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 16. Description of real estate: (if Debtor does not have a record interest): Recorded: 06/04/2004 Book/Page: M04/36226

Legal Description as per last deed of record BEGINNING AT A POINT WHICH IS 330 FEET WEST OF THE NORTHEAST CORNER OF

GOVERNMENT
[See Exhibit for Real Estate]

17. MISCELLANEOUS: 83863285-OR-35 49471 - Launch Servicing, LL

EnerBankUSA

File with: Klamath, OR

LoanID 203257 LenderCode ENRBK2

Debtor: PIZANO, ESTEBAN

Exhibit for Real Estate

16. Description of real estate: Continued

LOT 6 OF SECTION 29, TOWNSHIP 39 SOUTH, RANGE 9 EAST OF THE WILLAMETTE MERIDIAN, KLAMATH COUNTY, OREGON; THENCE EASTERLY ALONG THE NORTH LINE OF SAID SECTION 29, A DISTANCE OF 756 FEET; THENCE SOUTHERLY PARALLEL TO THE EAST LINE OF GOVERNMENT LOT 1 AND 6 TO A POINT ON THE SOUTH BOUNDARY OF GOVERNMENT LOT 2 OF SAID SECTION:

THENCE WEST ALONG THE SOUTH BOUNDARY OF GOVERNMENT LOTS 2 AND 1 A DISTANCE OF 756 FEET, MORE OR LESS, TO A POINT THAT IS 330 FEET WEST OF THE SOUTHEAST CORNER OF SAID GOVERNMENT LOT I; THENCE NORTH TO THE POINT OF BEGINNING. SAVING AND EXCEPTING THEREFROM THAT PORTION THEREOF LYING WITHIN THE RIGHT OF WAY OF MILLER ISLAND ROAD.

TAX ACCOUNT NO: 3909-02900-00300-000 KEY NO: 585183.

APN: R-3909-02900-00300-000

