

B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)

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

RESPECT TO THE REFERENCED COLLATERAL.

Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141

FOLLOW INSTRUCTIONS

Lien Solutions

P.O. Box 29071

2022-004301 Klamath County, Oregon 04/04/2022 02:21:01 PM Fee: \$92.00 **UCC FINANCING STATEMENT**

49471 - Launch Servicing,

85778462

NG OFFICE USE	ONLY	
if any part of the Ind ddendum (Form UC		
(S)/INITIAL(S)	SUFFIX	
CODE	COUNTRY	
3	USA	
if any part of the Ind ddendum (Form UC		
(S)/INITIAL(S)	SUFFIX	
CODE	COUNTRY	
3	USA	
E(S)/INITIAL(S)	SUFFIX	
CODE	COUNTRY	
3	USA	

	Glendale, CA 91209-9071	OROR				
L		FIXTURE				
	File with: Klamath, OR	_	THE ABOVE SPACE	IS FO	OR FILING OFFICE U	SE ONLY
1. E	DEBTOR'S NAME: Provide only one Debtor name (1a	or 1b) (use exact, full name; do not omit, m	odify, or abbreviate any part of the	Debtor	's name); if any part of the	Individual Debtor's
n	ame will not fit in line 1b, leave all of item 1 blank, check h	ere and provide the Individual Debtor i	nformation in item 10 of the Financi	ing Sta	tement Addendum (Form	JCC1Ad)
	1a. ORGANIZATION'S NAME					
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL N	AME A[ODITION	NAL NAME(S)/INITIAL(S)	SUFFIX
	HERNANDEZ	JUAN				
1c.	MAILING ADDRESS	CITY	ST	TATE	POSTAL CODE	COUNTRY
58	33 e 3rd st	Merrill	c	OR .	97633	USA
OR	2b. INDIVIDUAL'S SURNAME BARAJAS	FIRST PERSONAL N	AME AE	OITIDO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c.	MAILING ADDRESS	CITY	ST	TATE	POSTAL CODE	COUNTRY
_58	33 e 3rd st	Merrill		DR	97633	USA
3. 8	SECURED PARTY'S NAME (or NAME of ASSIGNEE	of ASSIGNOR SECURED PARTY): Provid	e only <u>one</u> Secured Party name (3	Ba or 3h	0)	
	3a. ORGANIZATION'S NAME EnerBankUSA					
OR		I see a				Laureny
	35. INDIVIDUAL'S SURNAME	FIRST PERSONAL N	AME AI	סוווטט	NAL NAME(S)/INITIAL(S)	SUFFIX
3 c.	MAILING ADDRESS	CITY	s	TATE	POSTAL CODE	COUNTRY
_1:	245 Brickyard Road, Suite 600	Salt Lake City	ι	JT	84106	USA
	COLLATERAL: This financing statement covers the follow RCHASE MONEY SECURITY INTEREST IN	5	L OF THE DEBTOR'S RIG	HT, 1	TITLE AND INTERES	== === ST IN

5. Check <u>only</u> if applicable and check <u>on</u>	<u>ly</u> one box: Collateral isheld in a Trus	st (see UCC1Ad, item 17 and li	nstructions)	being administered by a Dec	edent's Personal Representative	
6a. 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 Transmitt	ting Utility	Agricultural Lien	Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if app	olicable): Lessee/Lessor	Consignee/Consignor	Seller/Buye	r Bailee/Bailor	Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA:						
85778462	LoanID 224342 LenderCode ENRBK2					

PHOTOVALTAIC SOLAR ENERGY EQUIPMENT (IF ANY), INCLUDING BUT NOT LIMITED TO ROOFTOP OR GROUND MOUNT SOLAR PANELS, ELECTRICAL INVERTERS, MICROINVERTERS OR POWER OPTIMIZERS, CABLES AND WIRES, SUPPORT BRACKETS, RELATED EQUIPMENT, AND ADDITIONS OR REPLACEMENTS OF THE SAME. IN ADDITION, THE SECURITY INTEREST INCLUDES ALL WARRANTIES ISSUED WITH

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

FOLLOW INSTRUCTIONS		•		
 NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State because Individual Debtor name did not fit, check here 	atement; if line 1b was left blank			
9a. ORGANIZATION'S NAME				
OR 9b. INDIVIDUAL'S SURNAME				
HERNANDEZ				
FIRST PERSONAL NAME JUAN				
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	1		
		THE ABOVE SPACE	E IS FOR FILING OFFI	CE USE ONLY
0.DEBTOR'S NAME: Provide (10a or 10b) only one additional De	btor name or Debtor name that did not fit in	line 1b or 2b of the Financing S	Statement (Form UCC1) (use	e exact, full name;
do not omit, modify, or abbreviate any part of the Debtor's name) and 10a. ORGANIZATION'S NAME	d enter the mailing address in line 10c			
IG. SKOANEATION O IZAME				
DR 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
44 T			<u> </u>	
11. ADDITIONAL SECURED PARTY'S NAME OF L 11a. ORGANIZATION'S NAME	ASSIGNOR SECURED PARTY'S N	NAME: Provide only <u>one</u> nam	ne (11a or 11b)	
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
No. IN TELLE ALEST LESS		0,7,112	T GOTTAL GODE	
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):				<u> </u>
13. ☑ This FINANCING STATEMENT is to be filed [for record] (or rec	This FINANCING STATE	EMENT:		
REAL ESTATE RECORDS (if applicable)	covers timber to be	_	collateral X is filed as	a fixture filing
15. Name and address of a RECORD OWNER of real estate describe (if Debtor does not have a record interest):	d in item 16 16. Description of real estate	e:		
	Recorded: 04/	17/2019		
	Instrument #: 2	2019-004084		
		ion as per last de		
		F THE WI/2 S1/		
		OWNSHIP 41 S		
	EAST OF THE	E WILLAMETTE al Estate]	WERIDIAN, KL	
17. MISCELLANEOUS; 85778462-OR-35 49471 - Launch Servicing, LL	EnerBankUSA		ID 224342 LenderCode ENR	BK2

Debtor: HERNANDEZ, JUAN

Exhibit for Real Estate

16. Description of real estate: Continued

COUNTY, OREGON, MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING AT AN IRON PIN WHICH LIES EAST ALONG THE SECTION LINE A DISTANCE OF 1672.5 FEET AND NORTH 0 0 02' WEST ALONG THE CENTER LINE OF MCKINLEY STREET A DISTANCE OF

887.5 FEET AND WEST A DISTANCE OF 40 FEET FROM THE IRON MONUMENT WHICH MARKS THE SOUTHWEST CORNER OF SECTION 1, TOWNSHIP 41 SOUTH, RANGE 10 EAST OF THE WILLAMETTE MERIDIAN, AND RUNNING THENCE; WEST A DISTANCE OF 115.75 FEET TO AN IRON PIN; THENCE

NORTH 0 0 02' WEST A DISTANCE OF 62.5 FEET TO AN IRON PIN; THENCE EAST 115.75 FEET TO AN IRON PIN: THENCE SOUTH 00 02 EAST A DISTANCE OF 62.5 FEET, MORE OR LESS, TO THE POINT OF BEGINNING,.

APN: RI 19712

