2022-014186 Klamath County, Oregon

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UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) B. E-MAIL CONTACT AT FILER (optional) filings@goodleapsupport.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) GoodLeap, LLC PO Box # 981440 El Paso, TX 79998- 1440 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name name will not fit in line 1b, leave all of item 1 blank, check here and provide the in 1a. ORGANIZATION'S NAME	s; do not omit, mod rdividual Debtor inf	THE ABOVE SPA	CE IS FO	PR FILING OFFICE USE	ndividual Debtor
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and provide the ir	ndividual Debtor int	formation in item 10 of the Fi	nancing Sta	atement Addendum (Form U	CC1Ad)
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Na l					
	RST PERSONAL NA	AME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	Benjamin				
			STATE POSTAL CODE		COUNTRY
3326 Barry Ave K	LAMATH	I FALLS	OR	97603-7800	USA
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name name will not fit in line 2b, leave all of item 2 blank, check here and provide the In 2a. ORGANIZATION'S NAME	r; do not omit, modi ndividual Debtor inf	ify, or abbreviate any part of formation in item 10 of the Fir	the Debtor'	's name); if any part of the In atement Addendum (Form Ud	idividual Debtor CC1Ad)
2b. INDIVIDUAL'S SURNAME FIR	RST PERSONAL NA	AME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
c. MAILING ADDRESS CIT	Ŷ		STATE	POSTAL CODE	COUNTRY
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			,- = -: JD	,	
GoodLeap, LLC					
3b. INDIVIDUAL'S SURNAME FIR:	ST PERSONAL NA	ME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
: MAILING ADDRESS CIT	Y		STATE	POSTAL CODE	COUNTRY
8781 Sierra College Boulevard R	Roseville		CA	95746	USA
COLLATERAL: This financing statement covers the following collateral:			O/1	73730	

Equipment (If any), including but not limited to rooftop solar panels, solar roofing materials, wall mounted batteries, stand alone batteries, inverters, cables and wires, support brackets, roof mounted or ground mounted racking systems, related equipment, and additions or replacements of the same. In addition, the security interest includes all warranties issued with respect to the referenced collateral

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 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 Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buye	er Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: Acct # 2216110926	

UCC FINANCING STATEMENT ADDENDUM

### STATE POSTAL CODE ### DIVIDUAL'S SURNAME ### DIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S) ### DIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S) ### DIVIDUAL'S SURNAME ### DIVIDUAL'S SURNAME ### DIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S) ### DIVIDUAL'S SURNAME ### DIVIDUAL'S S					
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