Fee: \$87.00 **UCC FINANCING STATEMENT 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) 2805 88432 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Oregon (Klamath) SEE BELOW FOR SECURED PARTY CONTACT INFORMATION THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) not fit in line 1b, leave all of item 1 blank, check here 1a. ORGANIZATION'S NAME OR 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX RANDALL DAVID 1c. MAILING ADDRESS 3447 SHOREVIEW DRIVE CITY POSTAL CODE COUNTRY CHILOQUIN OR 97624 USA 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 2c. MAILING ADDRESS COUNTRY POSTAL CODE 3. 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 FIFTH ThIRD Bank, N.A. OR 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 3c. MAILING ADDRESS Fifth Third Bank Dividend, 38 POSTAL CODE COUNTRY Cincinnati OH 45263 USA Fountain Sq Plaza, 1MOBA5 4. COLLATERAL: This financing statement covers the following collateral: The collateral described below is located at the Debtors address listed above. ALL OF THE DEBTORS RIGHT TITLE AND INTEREST IN PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT (IF ANY) INCLUDING BUT NOT LIMITED TO ROOFTOP SOLAR PANELS ELECTRICAL INVERTERS CABLES AND WIRES SUPPORT BRACKETS RELATED EQUIPMENT MONITORING EQUIPMENT SMART METERS AND ADDITIONS OR REPLACEMENTS OF THE SAME. IN ADDITION THE SECURITY INTEREST INCLUDES ALL WARRANTIES ISSUED WITH RESPECT TO THE REFERENCED COLLATERAL ANY RENEWABLE ENERGY OR CARBON CERTIFICATES OR CREDITS (REFERRED TO AMONG OTHER THINGS AS SRECS) ANY RENEWABLE ENERGY PRODUCTION INCENTIVES (PERFORMANCE-BASED INCENTIVES) AND ANY OTHER ECONOMIC BENEFITS RELATED TO INCENTIVES TO SUPPORT RENEWABLE ENERGY PRODUCTION THAT BORROWER MAY RECEIVE OR BE ENTITLED TO AS A RESULT OF THE PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT. THIS SECURITY AGREEMENT DOES NOT

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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 Agricultural Lien Non-UCC Filing A Debtor is a Transmitting Utility 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor 8. OPTIONAL FILER REFERENCE DATA: 2805 88432

CREATE A SECURITY INTEREST IN THE DEBTORS REAL PROPERTY TO BE RECORDED IN THE LAND

RECORDS.

## UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS

9a. ORGANIZATION'S NAME							
9b. INDIVIDUAL'S SURNAME							
RANDALL							
FIRST PERSONAL NAME DAVID							
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX						
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DEBTOR'S NAME: Provide (10a or 10b) only one additional Debto do not omit, modify, or abbreviate any part of the Debtor's name) and en		line 1b or 2b	o of the Financing	Statem	ent (Form UCC1	1) (use exact, t	full name;
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10b. INDIVIDUAL'S SURNAME							
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INDIVIDUAL'S FIRST PERSONAL NAME							
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)							SUFFIX
MAILING ADDRESS	CITY		ST	TATE	POSTAL CODE	E	COUNTRY
ADDITIONAL SECURED PARTY'S NAME or	ASSIGNOR SECURED PART	V'S NAME	E: Dravida anh a		2 (11a or 11b)		
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11b. INDIVIDUAL'S SURNAME  MAILING ADDRESS  ADDITIONAL SPACE FOR ITEM 4 (Collateral):	city  d) in the 14. This FINANCING STA	TEMENT:	ST	TATE	POSTAL CODE	E	COUNTRY
Individual's surname  MAILING ADDRESS  ADDITIONAL SPACE FOR ITEM 4 (Collateral):  This FINANCING STATEMENT is to be filed [for record] (or recorde REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate described in ite	clTY  CITY  d) in the    14. This FINANCING STA  Covers timber to	TEMENT: be cutate:	ST	TATE	POSTAL CODE	E is filed as a fi	COUNTRY
This FINANCING STATEMENT is to be filed [for record] (or recorde REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate described in ite if Debtor does not have a record interest):  AVID RANDALL, 3447 SHOREVIEW DRIVE	clTY  CITY  d) in the    14. This FINANCING STA  Covers timber to	TEMENT: be cut ate: RTY IN -	covers as-extra	TATE	POSTAL CODE	E is filed as a fi	COUNTRY
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