

UCC FINANCING STATEMENT
FOLLOW INSTRUCTIONS

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

877-505-5400

B. E-MAIL CONTACT AT SUBMITTER (optional)

recordings@gorequire.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

reQuire Real Estate Solutions, LLC
P.O. Box 860
Palm Harbor, FL 34682

SEE BELOW FOR SECURED PARTY CONTACT INFORMATION

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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 not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S SURNAME

Larimore

FIRST PERSONAL NAME

William

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

1c. MAILING ADDRESS

4311 STURDIVANT AVE

CITY

KLAMATH FALLS

STATE

OR

POSTAL CODE

97603

COUNTRY

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

Larimore

FIRST PERSONAL NAME

Darlene

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

2c. MAILING ADDRESS

4311 STURDIVANT AVE

CITY

KLAMATH FALLS

STATE

OR

POSTAL CODE

97603

COUNTRY

USA

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

Puget Sound Cooperative Credit Union

OR

3b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

3c. MAILING ADDRESS

11201 SE 8th Street, Suite 208

CITY

BELLEVUE

STATE

WA

POSTAL CODE

98004-6420

COUNTRY

USA

4. COLLATERAL: This financing statement covers the following collateral:

Fixtures and energy equipment, including but not limited to residential solar energy equipment, all accessories, peripheral and associated equipment, and after acquired equipment, installed at 4311 STURDIVANT AVE KLAMATH FALLS OR 97603

LOT 6, BLOCK 1, TRACT #1007, WINCHESTER, COUNTY OG KLAMATH, STATE OF OREGON.

Parcel No.: 555223

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:

☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

☐ Agricultural Lien ☐ Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

Larimore339