

2025-000214

Klamath County, Oregon

01/10/2025 12:39:02 PM

MCDONALD AMBER 1c. MAILING ADDRESS CITY STATE POSTAL CODE C	idual Deb
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 3. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com 2. SEND ACKNOWLEDGMENT TO: (Name and Address) P.O. Box 29071 Glendale, CA 91209-9071 OROR FIXTURE THE ABOVE SPACE IS FOR FILING OFFICE USE O 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 Indiviname 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 UCC1 1a. ORGANIZATION'S NAME b. INDIVIDUAL'S SURNAME MCDONALD C. MAILING ADDRESS CITY STATE POSTAL CODE C. MAILING ADDRESS CITY STATE POSTAL CODE C. MAILING ADDRESS CITY STATE POSTAL CODE C. MAILING ADDRESS STATE STATE POSTAL CODE C. MAILING ADDRESS STATE POSTAL CODE C. MAILING ADDRESS STATE STATE POSTAL CODE C. MAILIN	idual Deb I Ad) SUFFIX
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2b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) S	SUFFIX
. MAILING ADDRESS CITY STATE POSTAL CODE C	COUNTRY
3a. ORGANIZATION'S NAME Sunnova TE Management LLC 3b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	COUNTRY
0 Greenway Plaza, Suite 540 Houston TX 77046 COLLATERAL: This financing statement covers the following collateral:	USA

VV007840108

102432406

UCC FINANCING STATEMENT ADDENDUM

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FOLLOW INSTRUCTIONS								
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement because Individual Debtor name did not fit, check here	; if line 1b was left blank							
9a. ORGANIZATION'S NAME								
OR 9b. INDIVIDUAL'S SURNAME								
MCDONALD								
FIRST PERSONAL NAME								
AMBER								
ADDITIONAL NAME(S)INITIAL(S)	SUFFIX							
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10a. ORGANIZATION'S NAME	-							
OR - 40- INDIVIDUALIS SUBNAME								
10b. INDIVIDUAL'S SURNAME								
INDIVIDUAL'S FIRST PERSONAL NAME								
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX			
	Lauri	T						
10c. MAILING ADDRESS	CITY	S	TATE	POSTAL CODE	COUNTRY			
11. ADDITIONAL SECURED PARTY'S NAME OF ASSI	 GNOR SECURED PARTY'S N	IAME: Provide only on	e name	(11a or 11b)				
11a. ORGANIZATION'S NAME	CHOR CECONED I ANTI CI	AANIE. 1 TOVIGE OTILY <u>OT</u>	<u>c</u> name	(114 01 115)				
OR 145 INDIVIDUALIS SUDNAMS								
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	A	DDITIONA	AL NAME(S)/INITIAL(S)	SUFFIX			
11c. MAILING ADDRESS	CITY	S	TATE	POSTAL CODE	COUNTRY			
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	I		•					
 This FINANCING STATEMENT is to be filed [for record] (or recorded) in REAL ESTATE RECORDS (if applicable) 		_		🔽				
15. Name and address of a RECORD OWNER of real estate described in item	covers timber to be an 16 16. Description of real estate		acted co	ollateral X is filed as	a fixture filing			
(if Debtor does not have a record interest):	1 To To. Becomplian of real collate							
	Owner Name:	Owner Name: MCDONALD AMBER Legal						
		Description: SUNSET VILLAGE 5TH ADDITION,						
	BLOCK 7, LOT	⁻ 11 Legal Lo	t: 11	For Property	Located			
	At: 3916 REDO							
	97603 United 9							
	Map Reference	e: County: KL	AMA.	ATH Docume	nt #:			
	2018-009784	.1.5-4-4- 7						
	[See Exhibit for Rea							
17. MISCELLANEOUS: 102432406-OR-35 25668 - SUNNOVA ENERGY CORPO	Sunnova TE Management LLC	File with: Klamath, OR	VV0078	40108				

Debtor: MCDONALD, AMBER

Exhibit for Real Estate

16. Description of real estate: Continued

County: KLAMATH COUNTY

