

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

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09/14/2016 11:27 AM \$12.00

Book - 10475 Pg - 8135-8136

GARY W. OTT

RECORDER, SALT LAKE COUNTY, UTAH

CT LIEN SOLUTIONS

330 N BRAND BLVD STE 700

GLENDALE CA 91203

BY: CBA, DEPUTY - MA 2 P.

| | |
|---|---------------------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141 | |
| B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) 25556 - SOLAR MOSAIC | |
| CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 | 55621307 UTUT FIXTURE |
| File with: Salt Lake, UT | |

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 Heart | FIRST PERSONAL NAME Zachary | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 1c. MAILING ADDRESS 4146 W Wendy Ave | CITY West Valley | STATE UT | POSTAL CODE 84120 |
| | | 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 | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 2c. MAILING ADDRESS | CITY | STATE | POSTAL CODE |
| | | COUNTRY | |

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 Solar Mosaic, Inc | | | |
| OR | | | |
| 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 3c. MAILING ADDRESS 1212 Broadway Ste 300 | CITY Oakland | STATE CA | POSTAL CODE 94612 |
| | | COUNTRY USA | |

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

The collateral includes the following, whether now owned or hereafter acquired, whether now existing or hereafter arising, and wherever located:

1. All solar panels, inverters, racking systems, wiring, electrical and mechanical connections, metering, monitoring and/or other distributed generation interconnect equipment, battery storage equipment, electrical vehicle power charging equipment, thermostat equipment, and landscaping services to accommodate the solar system (collectively, "Collateralized Goods");

2. All accessions, attachments, accessories, tools, parts, supplies, replacements of and additions to any Collateralized Goods;

3. All proceeds from warranty claims related to the Collateralized Goods, the home improvement agreement between the debtor and solar contractor ("Home Improvement Agreement") and, if debtor has received an operations and maintenance loan, the operations and maintenance agreement between the debtor and its operations and maintenance contractor ("Operations and Maintenance Agreement");

4. All rebates and incentives that are payable as a result of installing the Collateralized Goods except for such rebates and incentives which have been assigned to debtor's solar contractor or operations and maintenance contractor;

5. All debtor's rights, title, interests, and remedies under all agreements, statements and other documentation relating to the Collateralized Goods (including, without limitation, the Home Improvement Agreement and Operations and Maintenance Agreement); and

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 <u>only</u> if applicable and check <u>only</u> one box: | 6b. Check <u>only</u> if applicable and check <u>only</u> one box: |
| <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility | <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing |

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

8. OPTIONAL FILER REFERENCE DATA:

55621307 14658

23682

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

| | |
|--|--------|
| 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here <input type="checkbox"/> | |
| 9a. ORGANIZATION'S NAME | |
| OR | |
| 9b. INDIVIDUAL'S SURNAME Heart | |
| FIRST PERSONAL NAME Zachary | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

| | | | | |
|--|------|-------|-------------|---------|
| 10a. ORGANIZATION'S NAME | | | | |
| OR | | | | |
| 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 |

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

| | | | | |
|---------------------------|---------------------|-------------------------------|-------------|---------|
| 11a. ORGANIZATION'S NAME | | | | |
| OR | | | | |
| 11b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 11c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

6. All consideration received from the collection, sale or other disposition of any property that constitutes Collateralized Goods, including any payment received from any insurer arising from any loss, damage or destruction of any Collateralized Goods and any other payment received as a result of possessing any Collateralized Goods or any proceeds of Collateralized Goods.

All of the collateral described above is intended to be classified as personal property, but to the extent that any portion of such collateral is or becomes classified as a fixture, this filing constitutes a fixture filing as to such collateral. The collateral described above secures a purchase money obligation in favor of the secured party and secured party's lien thereon constitutes a purchase money security interest.

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

Zachary Heart
4146 W Wendy Ave
West Valley, UT 84120

14. This FINANCING STATEMENT:

covers timber to be cut covers as-extracted collateral is filed as a fixture filing

16. Description of real estate:

Parcel ID:
15-30-276-005-0000

LOT 78, VALLEY DOWN #5 4479-0073 6152-2249
6230-1137 8968-2918 9006-2751 9154-5739
9790-333 10129-6133,6134

State: UT
County: Salt Lake County

17. MISCELLANEOUS: 55621307-UT-35 25556 - SOLAR MOSAIC

Solar Mosaic, Inc

File with: Salt Lake, UT

14658 23682