UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS		14028582 B:					
A. NAME & PHONE OF CONTACT AT FILER (optional) Hannah Flynn 607-337-6082		10/12/2022 09:48 AM By: kkennington Fees: \$40.00 Rashelle Hobbs, Recorder, Salt Lake County, Utah Return To: NBT BANK, NA - LOAN OPERATIONS					
		52 S BROAD STN					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)							
NBT Bank, NA UT F 52 South Broad St. Norwich, NY 13815 File with: SALT LAKE Co	FIXTURE bunty, UT						
L		THE ABOV	E SPACE IS F	OR FILING OFFI	CE USE ONL	Y	
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full r name will not fit in line 1b, leave all of item 1 blank, check here		modify, or abbreviate any					
1a. ORGANIZATION'S NAME							
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)			UFFIX	
Cullimore	Dennis						
1c. MAILING ADDRESS 14898 S Mossley Bend	CITY Herriman		STATE		T	OUNTRY USA	
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full relationship).		modify, or abbreviate any	, ,				
		or information in item 10 of					
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITI	ONAL NAME(S)/INIT	IAL(S) SI	JFFIX	
Cullimore	Kathleen						
2c. MAILING ADDRESS 14898 S Mossley Bend	Herriman		STATE	POSTAL CODE 84096		OUNTRY U SA	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECUR	ED PARTY): Provi	de only <u>one</u> Secured Party	name (3a or 3b)	'	<u>'</u>		
3a. ORGANIZATION'S NAME NBT Bank, NA							
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFF			JFFIX	
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	C	OUNTRY	
52 South Broad St	Norwich		NY	13815		USA	
4. COLLATERAL: This financing statement covers the following collateral: All Solar Equipment; all attachments, accessories, tools, b any portion of the Solar Equipment; all claims of any type Equipment or the Installation Agreement; all rebates and i Equipment except for such rebates and incentives which h and remedies under all agreements, books, records, statem the Collateral (including, without limitation, the Installment collection, sale or other disposition of any property that consurer arising from any loss, damage or destruction of any possessing all or any portion of the Collateral all supporting to, substitutions and replacements for and rents, profits and insurance, indemnity, warranty or guaranty payable to you	or nature, in neentives that have been assignents and document. Agreemer constitutes Co by Collateral and obligation d products of a from time t	acluding warranty at are payable as a signed to your Instrumentation and of at), all considerational distribution and other payables; and all products f, each of the forego time with respect	claims rela result of in aller; all you ther genera on received any payme ment received and proce going and p ot to any of	ted to the Sola stalling the So our rights, title, I intangibles re from the oper nt received fro ed as a result eds of and all proceeds of any the foregoing.	or olar olar olar olar olar olar olar ol		
5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) 6a. Check only if applicable and check only one box:			being administered by a Decedent's Personal Representative [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 C	Consignee/Consign	or Seller/Buy	er E	Bailee/Bailor	Licensee/L	_icensor	

D43

269 Specialty Lending

UCC FINANCING STATEMENT ADDENDUM

FOLL	OW.	INSTR	⊋I ICT	IONS
	$\sim vv$	1110011	100 1	

NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line because Individual Debtor name did not fit, check here	ne 1b was left bl	ank				
9a. ORGANIZATION'S NAME						
OR 9b. INDIVIDUAL'S SURNAME Cullimore						
FIRST PERSONAL NAME Dennis						
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	THE ABOVE	SPACE	S FOR FILING OFFICE U	ISE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name do not omit, modify, or abbreviate any part of the Debtor's name) and enter the model.			n line 1b or 2b of the	Financing	Statement (Form UCC1) (use	exact, full name
10a. ORGANIZATION'S NAME						
10b. INDIVIDUAL'S SURNAME Cullimore INDIVIDUAL'S FIRST PERSONAL NAME						
Kathleen INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
10c. MAILING ADDRESS	CITY STATE POSTAL			POSTAL CODE	COUNTRY	
S Mossley Bend	Herrima	an		UT	84096	USA
11. ADDITIONAL SECURED PARTY'S NAME or ASSIGN 11a. ORGANIZATION'S NAME	OR SECUR	RED PARTY'	S NAME: Provide o	nly <u>one</u> nan	ne (11a or 11b)	
11b. INDIVIDUAL'S SURNAME	FIRST PERS	FIRST PERSONAL NAME			ADDITIONAL NAME(S)/INITIAL(S) SU	
11c. MAILING ADDRESS	CITY	СІТУ			POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):						
13. X This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	1 —	ANCING STATE	_	s-extracted	collateral X is filed as a f	ixture filing
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	ostion of real estate: ess: 14898 S Mossley Bend Dr Herriman UT 84096 erty Description: LOT 24, JUNIPER BEND AT ROSECREST 10392-7264 10614-9371 4 Block: Section: cipality: HERRIMAN vision: JUNIPER BEND/ROSECREST PH 1 ercel: 32-12-477-011-0000 UT County: SALT LAKE					
17. MISCELLANEOUS: NBT Bank, NA (Fixtures) File with: Herriman, SALT LA	KE Count	y, UT 269	Specialty Lend	ding D4	3	

FILING OFFICE COPY — UCC FINANCING STATEMENT ADDENDUM (Form UCC1Ad) (Rev. 04/20/11)