

14120712 B: 11427 P: 4560 Total Pages: 3
06/23/2023 08:20 AM By: avice Fees: \$40.00
Rashelle Hobbs, Recorder, Salt Lake County, Utah
Return To: LIEN SOLUTIONS
330 N. BRAND BLVD, SUITE 700 GLENDALE, CA 91203

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

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

Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141

B. E-MAIL CONTACT AT FILER (optional)

uccfilingreturn@wolterskluwer.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address) 55302 - Launch Servicing,

Lien Solutions
P.O. Box 29071
Glendale, CA 91209-9071

93656568
UTUT
FIXTURE

File with: Salt Lake, UT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER

14031632 B11380 P3828 10/19/2022 CC UT Salt Lake

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record]
(or recorded) in the REAL ESTATE RECORDS
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. PARTY INFORMATION CHANGE:

Check one of these two boxes:

AND Check one of these three boxes to:

This Change affects Debtor or Secured Party of record

CHANGE name and/or address: Complete

item 6a or 6b; and item 7a or 7b and item 7c

ADD name: Complete item

DELETE name: Give record name

to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

Cross River Bank c/o Sunlight Financial

OR

6b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7. CHANGED OR ADDED INFORMATION: complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

Solis Quantum Loan Trust 2023-1 c/o U.S. Bank Trust National Association ATTN: Corporate Trust Administration - Solis Quantum Loan Trust 2023-1

OR

7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS

Delle Donne Corporate Center Mail Code - EX-DE-WD2D, 1011
Centre Road, Suite 203

CITY

Wilmington

STATE

DE

POSTAL CODE

10805

COUNTRY

USA

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral

Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)

If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME

Cross River Bank c/o Sunlight Financial

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: JUNKINS, AMY

93656568
LoanID 360339

LenderCode NYL001

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form

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12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

12a. ORGANIZATION'S NAME

Cross River Bank c/o Sunlight Financial

OR

12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

13a. ORGANIZATION'S NAME

OR

13b. INDIVIDUAL'S SURNAME

JUNKINS

FIRST PERSONAL NAME

AMY

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

Debtor Name and Address:

JUNKINS, AMY - 6420 SOUTH 4195 WEST , WEST JORDAN, UT 84084

Secured Party Name and Address:

Solis Quantum Loan Trust 2023-1 c/o U.S. Bank Trust National Association ATTN: Corporate Trust Administration - Solis Quantum Loan Trust 2023-1 -
Delle Donne Corporate Center Mail Code - EX-DE-WD2D 1011 Centre Road, Suite 203, Wilmington, DE 10805

15. This FINANCING STATEMENT AMENDMENT:

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

17. Description of real estate:

Legal Description LOT 8 APRIL MEADOWS
#1. 6096-0369 6129-0086 6750-2573 7411-648
8568-8586 10061-3084 10271-3351
10319-8693 10726-1203
APN 21192330170000
County: SALT LAKE
Lot: 8
Section: 2S1W19

[See Exhibit for Real Estate]

18. MISCELLANEOUS: 93656568-UT-35 55302 - Launch Servicing, LL

Cross River Bank c/o Sunlight Financial File with: Salt Lake, UT

LoanID 360339 LenderCode NYL001

Debtor: JUNKINS, AMY

Exhibit for Real Estate

17. Description of real estate: Continued

Parcel ID:
21192330170000

