

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FIL Hannah Flynn 607-337-6082	ER (optional)				
B. E-MAIL CONTACT AT FILER (optional) SungageUCC@nbtbank.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
NBT Bank, NA 52 South Broad St.	UT FIXTURE				
Norwich, NY 13815	File with: WEBER County, UT				
L					

E# **3238138** PG 1 OF 2 Leann H. Kilts, WEBER COUNTY RECORDER 26-May-22 0823 AM FEE \$40.00 DEP REC FOR: NBT BANK, NA - LOAN OPERATIONS FEE \$40.00 DEP TN ELECTRONICALLY RECORDED

		THE ABOVE SI	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
	DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of item 1 blank, check here and provide	name; do not omit, modify, or abbreviate any part the Individual Debtor information in item 10 of the F					
0.0	1a. ORGANIZATION'S NAME						
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	SUFFIX			
	Wimmer	Michael					
1c. MAILING ADDRESS 2482 W 3125 N		CITY	STATE	POSTAL CODE 84404	COUNTRY		
		Farr West	UT		USA		
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	ADDITIO	SUFFIX			
	Wimmer	Shanda					
2c. MAILING ADDRESS 2482 W 3125 N		CITY	STATE	POSTAL CODE	COUNTRY		
		Farr West	UT	84404	USA		
	SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECUTIONS NAME $NBT\ Bank,\ NA$	RED PARTY): Provide only <u>one</u> Secured Party name	e (3a or 3b)				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX		
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY		
52 South Broad St		Norwich	NY	13815	USA		
		1		'			

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

All Solar Equipment; all attachments, accessories, tools, batteries, parts, supplies, replacements of and additions to all or any portion of the Solar Equipment; all claims of any type or nature, including warranty claims related to the Solar Equipment or the Installation Agreement; all rebates and incentives that are payable as a result of installing the Solar Equipment except for such rebates and incentives which have been assigned to your Installer; all your rights, title, interests, and remedies under all agreements, books, records, statements and documentation and other general intangibles relating to the Collateral (including, without limitation, the Installment Agreement), all consideration received from the operation, collection, sale or other disposition of any property that constitutes Collateral, including any payment received from any insurer arising from any loss, damage or destruction of any Collateral and any other payment received as a result of possessing all or any portion of the Collateral all supporting obligations; and all products and proceeds of and all accessions to, substitutions and replacements for and rents, profits and products of, each of the foregoing and proceeds of any insurance, indemnity, warranty or guaranty payable to you from time to time with respect to any of the foregoing.

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:	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 Consignee/Consignor Seller/But	yer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	
269 Specialty Lending	D43

UCC FINANCING STATEMENT ADDENDUM

E# 3238138 PG 2 OF 2 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								
	9a. ORGANIZATION'S NAME							
OR	9b. INDIVIDUAL'S SURNAME Wimmer							
FIRST PERSONAL NAME Michael								
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	THE ABOV	E SPACE I	S FOR FII	ING OFFICE U	SE ONLY
10.	DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name of do not omit, modify, or abbreviate any part of the Debtor's name) and enter the ma							
	10a. ORGANIZATION'S NAME							
OR	10b. INDIVIDUAL'S SURNAME Wimmer							
	INDIVIDUAL'S FIRST PERSONAL NAME Shanda							
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)							SUFFIX
	MAILING ADDRESS 7 3125 N	Farr We	est		STATE	84404		COUNTRY USA
11.	ADDITIONAL SECURED PARTY'S NAME OF ASSIGN 11a. ORGANIZATION'S NAME	IOR SECUP	RED PARTY'S	S NAME: Provide (only <u>one</u> nan	ne (11a or 11	lb)	
OB								
OK	11b. INDIVIDUAL'S SURNAME	FIRST PERS	SONAL NAME		ADDITIO	NAL NAME	(S)/INITIAL(S)	SUFFIX
11c	MAILING ADDRESS	CITY			STATE	POSTAL (CODE	COUNTRY
12.	12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):							
13.	This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	l —	ANCING STATE					
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):		16. Descripti	ion of real estate:				[X] is filed as a file	active mining
	Address: 2482 W 3125 N Farr West UT 84404 Property Description:							
	Lot: 29R Block: Section: Municipality: FARR WEST							
	Subdivision: HAPPY DAYS ESTS SUB PH 1 Tax Parcel: 19-424-0029 State: UT County: WEBER							
	State. Of County. Webber							
_								
	MISCELLANEOUS: BT Bank, NA (Fixtures) File with: Farr West, WEBER (County. U	T 269 Spec	ialty Lending	D43			

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