FO	CC FINANCING STATEMENT LLOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (o)		RICHAN DAVIS 11/23 FEE \$4	7529 B 7892 P 89 RD T. MAUGHAN COUNTY, UTAH 1 72021 12:07 PM 10.00 Pps: 2	RECORDER		
			DEP R	REC'D FOR 600	DOLEAP LL		
	E-MAIL CONTACT AT FILER (optional)						
_	filings@goodleapsupport.com						
C.	SEND ACKNOWLEDGMENT TO: (Name and	1 Address}					
	GoodLeap, LLC	71					
	PO Box # 981440	-		4			
	El Paso, TX 79998- 1440		12-539-0303				
	El Faso, 1A 73938- 1440	ī.		, , , ,			
	_	_	THE ABOVE SPACE IS E	OR FILING OFFICE USE	ONLY		
	1a. ORGANIZATION'S NAME						
OR		FIRST PERSONAL Julio	L NAME ADDIT	ONAL NAME(SÝINÍTIAL(S)	SUFFIX		
1¢.	1b. INDIVIDUAL'S SURNAME Sifuentes MAILING ADDRESS	Julio	STATE	POSTAL CODE	COUNTRY		
1	16. INDIVIDUAL'S SURNAME Sifuentes MAILING ADDRESS 119 Banbury Dr	Julio crry SYRACU:	SE STATE UT	POSTAL CODE 84075-9534	COUNTRY		
1 2,	1b. INDIVIDUAL'S SURNAME Sifuentes MAILING ADDRESS 119 Banbury Dr DEBTOR'S NAME: Provide only gas Debtor name will not fit in line 2b, leave at of item 2 blank, ch	Julio CITY SYRACU:  # (29 or 2b) (use exact, full name; do not amit, re	SE UT  nodify, or abbreviate any part of the Debt r information in item 10 of the Financing	POSTAL CODE 84075-9534 or's name); Flany part of the In	COUNTRY USA		
1c. 1 2,	1b. INDIVIDUAL'S SURNAME Sifuentes MAILING ADDRESS 119 Banbury Dr DEBTOR'S NAME: Provide only gas Debtor name will not fit in line 2b, leave all of item 2 blank, ch  2e. ORGANIZATION'S NAME	Julio CITY SYRACU: e (2e or 2b) (use exact, full name; do not amil, re- leck here and provide the Individual Debtor	SE UT  nodify, or abbreviate any part of the Debt r information in item 10 of the Financing	POSTAL CODE  84075-9534  or's name); # any part of the in Statement Addendum (Form U	COUNTRY USA Individual Debtor's CC1Ad)		
1c. 1 2, OR	1b. INDIVIDUAL'S SURNAME Sifuentes MAILING ADDRESS 119 Banbury Dr DEBTOR'S NAME; Provide only goe Debtor name will not fit in line 2b, feave all of item 2 blank, cl [2e. ORGANIZATION'S NAME  2b. INDIVIDUAL'S SURNAME	Julio CITY SYRACU:  # (29 or 2b) (use exact, full name; do not omit, research here  and provide the Individual Debtor	SE STATE UT nodify, or abbreviate any part of the Debt r information in Item 10 of the Financing L NAME ADDIT.	POSTAL CODE  84075-9534  of's name); Flany part of the in Statement Addendum (Form U  ONAL NAME(Sylnittial(S)	COUNTRY USA  Individual Debtor's CC1Ad)  SUFFIX  COUNTRY		
1c. 1 2.	16. INDIVIDUAL'S SURNAME Sifuentes MAILING ADDRESS 119 Banbury Dr DEBTOR'S NAME: Provide only gaz Debtor name will not fit in line 2b, leave all of item 2 blank, ch 2e. ORGANIZATION'S NAME  2b. INDIVIDUAL'S SURNAME  MAILING ADDRESS  SECURED PARTY'S NAME (or NAME of ASS 3s. ORGANIZATION'S NAME GOODLeap, LLC	Julio CITY SYRACU:  # (29 or 2b) (use exact, full name; do not omit, research here  and provide the Individual Debtor	SE STATE UT nodify, or abbreviate any part of the Debt r information in Item 10 of the Financing L NAME ADDIT.	POSTAL CODE  84075-9534  of's name); Flany part of the in Statement Addendum (Form U  ONAL NAME(Sylnittial(S)	COUNTRY USA  Individual Debtor's CC1Ad)  SUFFIX  COUNTRY		
1c. 1 2.	16. INDIVIDUAL'S SURNAME Sifuentes MAILING ADDRESS 119 Banbury Dr DEBTOR'S NAME: Provide only goe Debtor name will not fit in line 2b, leave all of item 2 blank, ch 2e. ORGANIZATION'S NAME  2b. INDIVIDUAL'S SURNAME  MAILING ADDRESS  SECURED PARTY'S NAME (or NAME of ASS 3e. ORGANIZATION'S NAME GOODLeap, LLC	Julio CITY SYRACU:  # (29 or 2b) (use exact, full name; do not omit, research here  and provide the Individual Debtor	SE UT nodify, or abbreviate any part of the Debt r information in Item 10 of the Financing  L NAME ADDIT.  STATE	POSTAL CODE  84075-9534  of's name); Flany part of the in Statement Addendum (Form U  ONAL NAME(Sylnittial(S)	COUNTRY USA  Individual Debtor's CC1Ad)  SUFFIX  COUNTRY		
2. OR 2c.	16. INDIVIDUAL'S SURNAME Sifuentes MAILING ADDRESS 119 Banbury Dr DEBTOR'S NAME: Provide only gaz Debtor name will not fit in line 2b, leave all of item 2 blank, ch 2e. ORGANIZATION'S NAME  2b. INDIVIDUAL'S SURNAME  MAILING ADDRESS  SECURED PARTY'S NAME (or NAME of ASS 3s. ORGANIZATION'S NAME GOODLeap, LLC	Julio CITY SYRACUS  # (29 or 2b) (use exact, full name; do not omit, research here and provide the individual Debtor  FIRST PERSONAL  CITY  IGNEE of ASSIGNOR SECURED PARTY): Provi	SE UT nodify, or abbreviate any part of the Debt r information in Item 10 of the Financing  L NAME ADDIT.  STATE	POSTAL CODE  84075-9534  or's name); # any part of the in Statement Addendum (Form U  ONAL NAME(S)INITIAL(S)  POSTAL CODE  3b)	COUNTRY USA Individual Debter's CC1Ad) SUFFIX		

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

All of the debtor's right, title and interest in the Photovoltaic Solar Energy Equipment or Energy Storage/ Battery Equipment (If any), including but not limited to rooftop solar panels, solar roofing materials, wall mounted batteries, stand alone batteries, inverters, cables and wires, support brackets, roof mounted or ground mounted racking systems, related equipment, and additions or replacements of the same. In addition, the security interest includes all warranties issued with respect to the referenced collateral.

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 Dece	dent's Personal Representative
Sa. Check only if applicable and check only one box:  Public-Finance Transaction Manufactured-Home Transaction	n A Debtor is a Transmitting Utility	6b. Check only if applicable as Agricultural Lien	nd check <u>prily</u> one bax:  Non-UCC Filing
7. ALTERNATIVE DESIGNATION (If applicable): Lessee/Lessor	Consigned/Consignor Selter/Bu	uyer Ballse/Ballor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: Acct # 2009028416			17

## UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS						
<ol> <li>NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if because Individual Debtor name did not fit, check here</li> </ol>	line 1b was left t	olank				
98. ORGANIZATION'S NAME						
B. INDIVIDUAL'S SURNAME Sifuentes						
FIRST PERSONAL NAME Julio						
ADDITIONAL NAME(S)INITIAL(S)	5	UFFIX			10 F00 FX W0 0FF10F	NOT ONLY
DEBTOR'S NAME: Provide (10a or 10b) only <u>one</u> additional Debtor name or do not omit, modify, or abbreviate any part of the Debtor's name) and enter the manual or only only on the provided of the provided or only only only only only only only only					Statement (Form UCC1) (use	
10a. ORGANIZATION'S NAME			74 6 75	-		,
OR 10b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME		· -		-,-		
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)						SUFFIX
10c. MAILING ADDRESS	CITY		- 12-11-11-1	STATE	POSTAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO 113. ORGANIZATION'S NAME  OR 116. INDIVIDUAL'S SURNAME	FIRST PERSON		S NAME: Provide		NAL NAME(S)INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	- 7)	<del></del>	STATE	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)	Covers	timber to be o	ut covers as	extracted	collateral X is filed as a	s focture filling
15. Name and address of a RECORD OWNER of real estate described in Item 16 (if Debtor does not have a record interest):	16. Description					
Julio Sifuentes	1	of: DAV	12			
	Address Real Est	of ate: 1119 B	anbury Dr, SYR	CUSE, I	JT, 84075-9534	
		N: 1253 OT 303, HE		ing su	B PHASE 3. CONT. 0.1	8 ACRES
17. MISCELLANEOUS:			•		or ords	-1