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Record at the request of and
when recorded return to:
GoodLeap, LLC



ENT 82705-2024 PG 1 of 2
ANDREA ALLEN
UTAH COUNTY RECORDER
2024 Nov 22 01:24 PM FEE 40.00 BY KR
RECORDED FOR GOODLEAP OPERATING ACCOUNT

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

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

B. E-MAIL CONTACT AT FILER (optional)

filings@goodleapsupport.com

C SEND ACKNOWLEDGMENT TO. (Name and Address)

GoodLeap, LLC
PO Box # 981440
El Paso, TX 79998- 1440

SEE BELOW FOR SECURED PARTY CONTACT INFORMATION

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	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
	Zahrt	Bob		
1c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1222 E 500 S	SPANISH FORK	UT	84660	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
				USA

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				
OR	GoodLeap, LLC	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
3b INDIVIDUAL'S SURNAME	CITY	STATE	POSTAL CODE	COUNTRY
				USA
3c MAILING ADDRESS	Roseville	CA	95661	

4 COLLATERAL: This financing statement covers the following collateral

All of the debtors 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 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/Buyer Bailee/Bailor Licensee/Licensor

8 OPTIONAL FILER REFERENCE DATA

Acct # 2406210054

FIX

UTAH

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

9a. ORGANIZATION'S NAME			
OR	9b. INDIVIDUAL'S SURNAME Zahrt		
	FIRST PERSONAL NAME Bob		
	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. <input type="checkbox"/> ADDITIONAL SECURED PARTY'S NAME or <input type="checkbox"/> ASSIGNOR SECURED PARTY'S NAME. Provide only <u>one</u> name (11a or 11b)			
11a ORGANIZATION'S NAME			
OR	11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE
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)

14. This FINANCING STATEMENT

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

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 of real estate

Bob Zahrt

County of: UTAH

Address: 1222 E 500 S, SPANISH FORK, UT, 84660

APN: 461410021

LOT 25, PLAT K, MOUNT LOAFER SUB AREA 0.173 AC

17. MISCELLANEOUS: FIX