



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

ANDREA ALLEN UTAH COUNTY RECORDER 2022 Aug 16 12:55 pm FEE 40.00 BY MG RECORDED FOR GOODLEAP

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	
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				بعادية والتحاليا		_
abbreviate	any part of	the Debtor	's name); i	f any part o	f the Individ	dual
on in item	10 of the FI	nancing St	atement Ad	dendum (F	orm UCC1.	Adı

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use name will not fit in line 1b, leave all of item 1 blank, check here are	exact, full name; do not omit, modify, or abbreviate of provide the individual Debtor liformation in Item 1	any part of the Debtor C of the Financing St	's name); if any part of the li	ndividual Debtor's	
1a. ORGANIZATION'S NAME					
OR ALL MANUEL AND AND ALL MANUEL AND					
16. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)		
Jones	Brian				
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
4936 W Northwood Ln	HIGHLAND	UT	84003-8988	USA	
2a. ORGANIZATION'S NAME	d provide the Individual Debtor information in item 1	0 of the Financing St	atement Addendum (Form U	CC1Ad)	
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)		
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN	OR SECURED PARTY): Provide only one Secured	Party name (3a or 3b)		
3a. ORGANIZATION'S NAME			 		
GoodLeap, LLC					
GoodLeap, LLC 35. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	ISUFFIX	
DP	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
NP	FIRST PERSONAL NAME	ADDITION STATE	NAL NAME(S)/INITIAL(S)	SUFFIX	

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/Buye	er Ballee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	
Acct # 2216093826	

UCC FINANCING STATEMENT ADDENDUM

FOLLOWINSTRUCTIONS				•		
 NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement because Individual Debtor name did not fit, check here 	; if line 1b was left blank					
9a. ORGANIZATION'S NAME						
						*
						-
OR 9b. INDIVIDUAL'S SURNAME						
Jones						
FIRST PERSONAL NAME	· · · · ·	-				
Brian						
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX					
		THE ABOVE S	PACE	IS FOR FI	I ING OFFICE	LISE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name	or Debtor name that did not fit in lin	ne 1b or 2b of the Fin	ancing S	Statement (orm (ICC1) (use	exact full name
do not omit, modify, or abbreviate any part of the Deblor's name) and enter the	mailing address in line 10c		and ing	oracomonic (i	om 0001) (030	exact, full flame
10a. ORGANIZATION'S NAME						
OR	•					
OR 10b. INDIVIDUAL'S SURNAME		-	_			
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
10c. MAILING ADDRESS	CITY	5	STATE	POSTAL	CODE	COUNTRY
				<u> </u>		
11. ADDITIONAL SECURED PARTY'S NAME or ASSIGN	NOR SECURED PARTY'S	NAME: Provide onl	y <u>one</u> na	ame (11a or	11b)	
11a. ORGANIZATION'S NAME						
OR 11b. INDIVIDUAL'S SURNAME	I FIRST OF BOOK AND ADDRESS OF BOOK AND ADDRES					• • • • • • • • • • • • • • • • • • • •
TIS. INDIVIDUAL S SURVAINE	FIRST PERSONAL NAME		ADDITIO	NAL NAME	(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY		STATE	IDOOTAL	2005	-
THE MALE TO A SECTION ASSESSMENT OF THE SECT	Citt		MIE	POSTAL	CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):						
72. ABBITTONAL OF AGE FOR THEM 4 (Goldateral).						
the state of the s						
13. X This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14. This FINANCING STATEME	NT:				سحسس خوا
REAL ESTATE RECORDS (if applicable)	covers timber to be cut	covers as-ex	tracted o	collaterai	X 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:					
	County of: UTAH	•				
Brian Jones		•				
	Address of Real Estate: 4936 W N	Vorthwood Ln, HI	GHLA	ND, UT, 8	34003-8988	•
	APN: 51:691	:0239				
	LOT 239, PLAT D, RIDO	GEVIEW SUB A	REA 0.	103 AC		
17 MISCELLANICOLIS	<u> </u>					
17. MISCELLANEOUS:						