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ICC FINANCING STATEMENT DLLOW INSTRUCTIONS		Recorded: 4/10/2 County Recording Iowa E-Filing Fee: Combined Fee: \$2 Revenue Tax: Delaware County	9 Fee \$3. 20.0 , low	e: \$17.00 00 0	
. NAME & PHONE OF CONTACT AT FILER (option Name: Wolters Kluwer Lien Solutions Phone:		Daneen Schindler BK: 2023 PG: 7		CORDER	
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Ad	ddress) 52667 - Launch - Sunlight				
Lien Solutions	92258876				
P.O. Box 29071					
Glendale, CA 91209-9071	IAIA				
1	FIXTURE				
File with: Delaware,	IA	THE ABOVE SPACE	IS F	OR FILING OFFICE US	SE ONLY
DEBTOR'S NAME: Provide only one Debtor name	<u></u>				
name will not fit in line 1b, leave all of item 1 blank, chec 1a. ORGANIZATION'S NAME	ck here and provide the Individual Debtor inf	formation in item 10 of the Financ	ing Sta	Itement Addendum (Form I	JCC1Ad)
II. ONOMIZATIONO NAME					
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	.ME A	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
KLAUS	BRIAN		J		
MAILING ADDRESS	CITY	S	TATE	POSTAL CODE	COUNTRY
68 EAST CLARA AVENUE	MANCHESTER	R 1.	Α	52057	USA
DEBTOR'S NAME: Provide only one Debtor name	·				
name will not fit in line 2b, leave all of item 2 blank, chec	ck here and provide the Individual Debtor inf	formation in item 10 of the Financ	ing Sta	Itement Addendum (Form I	JCC1Ad)
24. GROANZATION O TVANIE					
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	.ME A	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
MAILING ADDRESS	CITY	S	TATE	POSTAL CODE	COUNTRY
SECURED PARTY'S NAME (or NAME of ASSIG	NEE of ASSIGNOR SECURED PARTY): Provide	only <u>one</u> Secured Party name (3	Ba or 3	o)	
3a. ORGANIZATION'S NAME Cross River Bank					
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	AME AME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
				, , , , ,	
: MAILING ADDRESS	CITY	S	TATE	POSTAL CODE	COUNTRY
85 Teaneck Road	Teaneck		٧J	07666	USA
COLLATERAL: This financing statement covers the fo	INTEREST IN (A) PHOTOVOLTAIC SO	OLAR ENERGY EQUIPMI VERTERS, MICROINVER			IIZERS,

5. Check only if applicable and check	only one box: Collateral is held in	n a Trust (see UCC1Ad, item 17 ar	nd Instructions)	being administered by a Dec	edent's Personal Representative
6a. Check only if applicable and chec	k <u>only</u> one box:			6b. Check only if applicable	and check only one box:
Public-Finance Transaction	Manufactured-Home Transa	action A Debtor is a Trans	mitting 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 D	ATA:				
92258876	LoanID 432331			LenderCode	SUN005

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing St because Individual Debtor name did not fit, check here	tatement; if line 1b was left blank				
9a. ORGANIZATION'S NAME					
9b. INDIVIDUAL'S SURNAME KLAUS					
FIRST PERSONAL NAME					
BRIAN ADDITIONAL NAME(S)INITIAL(S)	SUFFIX	(
J		THE ABOV	E SPACE	IS FOR FILING OFF	CE USE ONL
DEBTOR'S NAME: Provide (10a or 10b) only <u>one</u> additional De do not omit, modify, or abbreviate any part of the Debtor's name) an			Financing S	statement (Form UCC1) (us	e exact, full name
10a. ORGANIZATION'S NAME		-			
10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL 3 FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
TARRITIONAL OF CURED BARTYIO WAYS	7 AGGIONOR OFGURER RAR	T.//0		(11)	
ADDITIONAL SECURED PARTY'S NAME OF LITE. ORGANIZATION'S NAME	ASSIGNOR SECURED PAR	TY'S NAME: Provide onl	y <u>one</u> nam	le (11a or 11b)	
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAI	ME	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
; MAILING ADDRESS	COLTY		07475	I DOOTAL CODE	COLINITRY
: MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
ADDITIONAL SPACE FOR ITEM 4 (Collateral):	•			•	· ·
This FINANCING STATEMENT is to be filed [for record] (or re	corded) in the 14. This FINANCING	STATEMENT:			
REAL ESTATE RECORDS (if applicable)	covers timbe	_	-extracted	collateral 🛛 is filed as	a fixture filing
Name and address of a RECORD OWNER of real estate describe (if Debtor does not have a record interest):	ed in item 16 16. Description of rea	al estate:			
		cription: THAT			
		R (SE1/4) OF T			UARTER
		F SECTION TV IP EIGHTY-NIN			NGE
		VEST OF THE			
		ENCING AT A			
		LARA AVENU			
		or Real Estate]	,	*** 10 11111211	()

Debtor: KLAUS, BRIAN, J

Exhibit for Real Estate

16. Description of real estate: Continued

FEET EAST OF THE WEST LINE OF SAID SOUTHEAST QUARTER (SE1/4) OF THE NORTHEAST QUARTER (NE1/4) AND RUNNING THENCE EAST ALONG SAID NORTH LINE OF CLARA AVENUE ONE HUNDRED SEVENTY-EIGHT AND NINE-TENTHS (178.9) FEET, THENCE NORTH ONE HUNDRED TWENTY (120.0) FEET, THENCE WEST ONE HUNDRED SEVENTY EIGHT AND NINE-TENTHS (178.9) FEET, THENCE SOUTH ONE HUNDRED TWENTY (120.0) FEET TO THE POINT OF BEGINNING.

APN: 630292103200

