APN: 01304235	Record at the re	return to:		Total:	\$60.00		019-15767 09/2019 02:12 F UNT Pgs=2
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS	Paramount Equ LLC DBA Loan			00004	0522019	01576700020026	
A. NAME & PHONE OF CONTACT AT FILER (on	ptional)	,	1	OFFICI	AL RECO	DD DD	
B. E-MAIL CONTACT AT FILER (optional) filings@loanpalsupport.com C. SEND ACKNOWLEDGMENT TO: (Name and Paramount Equity Mortgage, LLC DE PO Box 4387 Portland, OR 97208	•			AMYE	LMER, RE	CORDER	
1. DEBTOR'S NAME: Provide only one Debtor name	ne (1a or 1b) (use exact.	full name: do not omit	modify or at	THE ABOVE SE	ACE IS FO	R FILING OFFICE	USE ONLY
Harris Will flot in all fills ID, leave all of Refit I Dialik, Ci	neck here and provi	ide the Individual Debt	or information	in item 10 of the	Financing Sta	s name); if any part of stement Addendum (Fo	rne individual Debtor's orm UCC1Ad)
1a. ORGANIZATION'S NAME							
1b. INDIVIDUAL'S SURNAME		FIRST PERSONA	LNAME	-+	ADDITIO	NAL NAME(S)/INITIAL	(S) SUFFIX
Blume		John)			
c. MAILING ADDRESS 3583 Jane Street		Caliente	*		STATE	POSTAL CODE 89008	COUNTRY
SECURED PARTY'S NAME (or NAME of ASSI	GNEE of ASSIGNORSE	CITY DEPTY DE		2011	STATE	POSTAL CODE	COUNTRY
3a. ORGANIZATION'S NAME		CURED PARTY): Pro	nde only <u>one</u>	Secured Party na	ime (3a or 3b)	
Paramount Equity Mortgage, LLC DBA 3b. INDIVIDUAL'S SURNAME	A Loanpal	LEIDOT DE DOUG					·
SS III D I I I I I I I I I I I I I I I I		FIRST PERSONA	LNAME		ADDITION	NAL NAME(S)/INITIAL	(S) SUFFIX
c. MAILING ADDRESS	_	CITY	+		STATE	POSTAL CODE	COUNTRY
8781 Sierra College Boulevard COLLATERAL: This financing statement covers the		Roseville	/_		CA	95746	USA
. All of the debrar's minks the			35				_
All of the debtor's right, title and interest but not limited to rooftop solar panels, brackets, roof mounted or ground mousecurity interest includes all warranties	solar roofing mater inted racking systen	ials, wall mounte ns, related equipr	d batteries nent, and :	s, stand alone additions or r	batteries,	nverters, cables a	nd wires sunnart
brackets, roof mounted or ground mou	solar roofing mater inted racking systen	ials, wall mounte ns, related equipr	d batteries nent, and :	s, stand alone additions or r	batteries,	nverters, cables a	nd wires sunnort
brackets, roof mounted or ground mou	solar roofing mater inted racking systen issued with respect	ials, wall mounte ns, related equipr	d batteries	s, stand alone additions or r	batteries, i	nverters, cables a	and wires, support naddition, the
but not limited to rooftop solar panels, brackets, roof mounted or ground mous security interest includes all warranties Check only if applicable and check only one box: Collate. Check only if applicable and check only one box:	solar roofing mater inted racking systen issued with respect	rials, wall mounte ns, related equipr to the referenced	d batteries	s, stand alone additions or r .	batteries, eplacemer	nverters, cables a	and wires, support n addition, the
but not limited to rooftop solar panels, brackets, roof mounted or ground mous security interest includes all warranties Check only if applicable and check only one box: Collate. Check only if applicable and check only one box: Public-Finance Transaction Manufacture	solar roofing mater inted racking systen issued with respect	rials, wall mounte ns, related equipr to the referenced	d batteries nent, and i l collateral 17 and Instru	s, stand alone additions or r . ctions) beir	batteries, eplacemer	nverters, cables a its of the same. I d by a Decedent's Pe applicable and check	and wires, support n addition, the

NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statemen	ent: if line 1h was left blank	¬ ()	
because individual Deptor name did not fit, check here	and in was left blank,	\ \	
9a. ORGANIZATION'S NAME		1	\
		\	\
		\	1
9b. INDIVIDUAL'S SURNAME		\	\
Blume			\
FIRST PERSONAL NAME			\
John			\ \
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
		THE ABOVE SPACE IS FOR FILING	OFFICE LISE ONLY
DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor named on not omit, modify, or abbreviate any part of the Debtor's name) and enter the	ne or Debtor name that did not fit i	in line 1b or 2b of the Financing Statement (Form U)	CC1) (use exact, full oa
do not omit, modify, or abbreviate any part of the Debtor's name) and enter to 10a. ORGANIZATION'S NAME	he mailing address in line 10c		I) (add chaol; Ian Ha
TOB. ORGANIZATION'S NAME			
10b. INDIVIDUAL'S SURNAME			
The state of the s	1))	
INDIVIDUAL'S FIRST PERSONAL NAME			
	/ /		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		\	SUFFIX
			Johns
MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTR
ADDITIONAL SECURED PARTY'S NAME of ASSIG	ONOR SECURED PARTY	"S NAME: Provide only one name (11a or 11b)	
11a. ORGANIZATION'S NAME			
11b. INDIVIDUAL'S SURNAME			
TID. INDIVIDUAL S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INIT	TIAL(S) SUFFIX
MAILING ADDRESS	CITY		
\ \	CITT	STATE POSTAL CODE	COUNTRY
ADDITIONAL SPACE FOR ITEM 4 (Collateral):			
Volume (Control of the Control of th		/	•
	/ /		
	///		
		•	•
V This Financing Officers	T.: -		
This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	· —		
Name and address of a RECORD OWNER of real estate described in Item 16	16. Description of real estate		filed as a fixture filing
if Debtor does not have a record interest):			
n Blume	County of: Linc	oln	
. \	Address of	•	
	Real Estate: 3583 J	ane Street, Caliente, NV, 89008	
	APN: 0130)4235	
	PC	L 43A OF PRICE MAP A/463	
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