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LINCOLN COUNTY, NV

Rec:\$60.00 Total:\$60.00

LIEN SOLUTIONS

2024-166682

03/11/2024 04:23 PM

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UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141					
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	25556 - SOLAR MOSAIC				
Lien Solutions P.O. Box 29071	97796509				
Glendale, CA 91209-9071	NVNV				
•	FIXTURE .				

OFFICIAL RECORD AMY ELMER, RECORDER

		THE ADOLES	DA 05 10 500 50 010 015 05	
File with: Lincoln, NV 1a. INITIAL FINANCING STATEMENT FILE NUMBER	las 5		SPACE IS FOR FILING OFFICE L	
2022-163424 11/8/2022 CC NV Lincoln	This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13			
TERMINATION: Effectiveness of the Financing Statement identified about the Statement	ove is terminated with resp	ect to the security intere	st(s) of Secured Party authorizing this	Termination
 ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7 For partial assignment, complete items 7 and 9 and also indicate affected 		e in item 7c <u>and</u> name	of Assignor in item 9	
 CONTINUATION: Effectiveness of the Financing Statement identified at continued for the additional period provided by applicable law 	pove with respect to the se	curity interest(s) of Sec	ured Party authorizing this Continuation	Statement is
5. PARTY INFORMATION CHANGE:			/	
	one of these three boxes to:		name: Complete item DELETE nam	io: Ciuo rocard nama
This Change affects Debtor or Secured Party of record ite	HANGE name and/or addres m 6a or 6b; <u>and</u> item 7a or 7	b <u>and</u> item 7c 7a or		e: Give record name in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Change	ge - provide only <u>one</u> nam	e (6a or 6b)		
6a. ORGANIZATION'S NAME				
OR 6b. INDIVIDUAL'S SURNAME Broadhead	FIRST PERSONAL NAME Pauline	ME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information	n Change - provide only one na	me (7a or 7b) (use exact, full n	ame; do not omit, modify, or abbreviate any part of	the Debtor's name)
7a. ORGANIZATION'S NAME	/			
OR 7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME			,	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		/		SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
B. COLLATERAL CHANGE: Also check one of these four boxes: Also Indicate collateral:	ADD collateral D	ELEȚE collateral	RESTATE covered collateral	ASSIGN collateral
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A If this is an Amendment authorized by a DEBTOR, check here and provi) (name of Assignor, if this is an Assigni	ment)
9a. ORGANIZATION'S NAME Solar Mosaic LLC				-
9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	MÉ	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor Name: Broadhead,	Pauline			
97796509 315083			604250	
			Prepared by Lien Solution	ons, P.O. Box 29071,
THE PARTY AND ADDRESS OF THE PARTY AND ADDRESS			a,	74 T 1 (000) 004 0000

	CC FINANCING STATEMENT AMENDME	NT ADDEN	DUM	•		
11.	INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a or 22-163424 11/8/2022 CC NV Lincoln	Amendment form]		
12.	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item	9 on Amendment for	m	1	\ \	
	12a. ORGANIZATION'S NAME Solar Mosaic LLC				\ \	
					\ \	
OR	12b. INDIVIDUAL'S SURNAME				_ \ \	
	FIRST PERSONAL NAME					
	ADDITIONAL NAME(S)INITIAL(S)		SUFFIX	THE ABOVE S	SPACE IS FOR FILING OFFICE U	SE ONLY
13.	Name of DEBTOR on related financing statement (Name of a current D one Debtor name (13a or 13b) (use exact, full name; do not omit, modil	ebtor of record requi fy, or abbreviate any	red for indexing part of the Deb	purposes only in som tor's name); see Instr	ne filing offices - see Instruction iter actions if name does not fit	n 13): Provide only
	13a. ORGANIZATION'S NAME			7	1	
OR	13b. INDIVIDUAL'S SURNAME Broadhead	FIRST PERS	ONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Sec Sol	eadhead, Pauline - 464 Cottonwood Street , Alamo, NV 89 cured Party Name and Address: ar Mosaic LLC - 601 12th Street, Suite 325 , Oakland, CA					
^{16.} Pa	This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted collateral in it is name and address of a RECORD OWNER of real estate described in it if it is it is it is in the interest in it is it is in the interest in it is in the interest in it is in it in it in it is in it in it in it in it is in it in i		¹⁹ 5 65 A State:	tion of real estate: AC. IN NE 1/ NV y: Lincoln C		
18.	MISCELLANEOUS: 97796509-NV-17 25556 - SOLAR MOSAIC	Solar Mosaic LLC		File with: Lincoln, NV	315083 604250	