190-30-111-065

## LINCOLN COUNTY, NV Rec:\$90.00 Total:\$90.00

2024-166927 05/22/2024 03:22 PM

CSC

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UCC FINANCING STATEMENT		000	140692	02401669270030039	1212 11 11 11
FOLLOWINSTRUCTIONS		OFF	ICIAL R	ECORD	
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294		AMY	ELMER	R, RECORDER	
B. E-MAIL CONTACT AT SUBMITTER (optional)  SPRFiling@cscglobal.com		٧		\ \	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		~		\ \	
2828 43542			The Real Property lies, the Parks of the Par	_ \ \	
CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed	In: Nevada (Lincoln)			/	
SEE BELOW FOR SECURED PARTY CONTACT INFORMATI	`	THE ABOVE SPA	CE IS FO	R FILING OFFICE USE O	NLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full nar not fit in line 1b, leave all of item 1 blank, check here		dify, or abbreviate any part of the D information in item 10 of the Financir			Debtor's name will
1a. ORGANIZATION'S NAME	/ /				
or 1b. INDIVIDUAL'S SURNAME MCLEMORE	FIRST PERSONA MIEKO	LNAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 2933 MONTMORENCY STREET	HENDERS	ON	STATE	POSTAL CODE 89044	COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name					Debtor's name will
/ 4	ne Individual Debtor	Information in item 10 of the Financir	g Statemen	t Addendum (Form UCC1Ad)	
2a, ORGANIZATION'S NAME					
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONA	IL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURE	D PARTY): Provid	e only one Secured Party name (3)	a or 3b)		1
3a. ORGANIZATION'S NAME Fifth Third Bank, N.A.	,	,			
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS Fifth Third Bank Dividend, 38 Fountain Sq Plaza, 1MOBA5	CITY Cincinnati	/ /	STATE	POSTAL CODE 45263	COUNTRY
COLLATERAL: This financing statement covers the following collateral:     The collateral described below is located at the Debto		liate al abassa ALL OF	<u> </u>	L	<del></del>
AND INTEREST IN PHOTOVOLTAIC SOLAR ENER	ors address GY FOUIDN	IISTED ADOVE. ALL OF IENT (IF ANY) INCL	I HE L	BUT NOT LIMITE	TO TO
ROOFTOP SOLAR PANELS ELECTRICAL INVERTI	ERS CABLE	S AND WIRES SUP	PORT!	BRACKETS RELA	TED
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IN ADDITION THE SECURITY INTEREST INCLUDE REFERENCED COLLATERAL ANY RENEWABLE E					:
(REFERRED TO AMONG OTHER THINGS AS SRE					TIVES
(PERFORMANCE-BASED INCENTIVES) AND ANY	OTHER EC	ONOMIC BENEFITS	RELA.	TED TO INCENTI	VES TO
SUPPORT RENEWABLE ENERGY PRODUCTION T	THAT BORF	ROWER MAY RECEI	VE OR	BE ENTITLED TO	O AS A
RESULT OF THE PHOTOVOLTAIC SOLAR ENERG CREATE A SECURITY INTEREST IN THE DEBTOR	T EQUIPIVII S REAL PR	OPERTY TO BE RE	CORDI	ED IN THE LAND	NOI
RECORDS.	· ·- ·				
E Charle and if anniversely and shock only one have Colletons in Thold in a Taust	1100444 item	47 and leaderedieses) Design	- administra	ad by a Dacedent's Personal i	Pancapantativa

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions	s)
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 Utili	ity Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor S	Seller/Buyer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	2828 43542

NAME OF FIRST DESTROYS. Same as fee to or to or "Planning Solatenand," if live 19 was sint blank    See ROWINGLASS SURVAINE	JCC FINANCING STATEMENT ADDENDUM OLLOW INSTRUCTIONS					
See DRIGHER STATE SECOND NAME    See DRIGHER SECOND NAME   Debtor name or Debtor		ne 1b was left blank			/ /	
MCLEMORE    PRIST PERSONAL NAME   MIEKO					\ \	\
FIRST PERSONAL NAME MIEKO ADDITIONAL NAME(S)INITIAL(S)  DEBTOR'S NAME: Provide (10s or 10s) only gas additional Debtor name or Debtor name in the dati not fit in are 10 or 2b of the Financing Statement (Form UCC1) (use exact, full rising, do not omit, mothy, or abbreviate any part of the Dictor's name) and enter the mailing address in line ) 05  Tab. ORGANIZATION'S NAME TIGE. INDIVIDUAL'S RISIT PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S RISIT PERSONAL NAME INDIVIDUAL'S SURVANE IT ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only gain quarte (11s or 11tb)  TITL ORGANIZATION'S NAME TIGE INDIVIDUAL'S SURVANE FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL SECURED PARTY'S NAME or TITLE POSTAL CODE COUNTRY  TITL INDIVIDUAL'S SURVANE FIRST PERSONAL NAME TITL INDIVIDUAL'S SURVANE TITL ABOUTTONAL NAME(S)INITIAL(S) SUFFIX TITL INDIVIDUAL'S SURVANE TITL INDIV						
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INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S)  C. MAILING ADDRESS  CITY  STATE POSTAL CODE  COUNTRY  THE ORGANIZATION'S NAME  THE INDIVIDUAL'S SURVAME  FIRST PERSONAL NAME  FIRST PERSONAL NAME  ADDITIONAL SPACE FOR ITEM 4 (Collateral):  C. MAILING ADDRESS  CITY  STATE POSTAL CODE  COUNTRY  STATE POSTAL CODE  COUNTRY  STATE POSTAL CODE  COUNTRY  STATE POSTAL CODE  COUNTRY  14. This FINANCING STATEMENT:  COVERS THE POSTAL CODE  COUNTRY  COUNTRY  15. This FINANCING STATEMENT is to be filed for record (or recorded) in the REAL ESTATE RECORDS (if applicables)  16. Description of real estate:  CITY  This FINANCING STATEMENT:  COVERS AS ABOVEN AS A SHOWN BY MAP THEREOF ON FILE IN BOOK 127 OF PLATS, PAGE 65, IN THE OFFICE OF THE COUNTY RECORDER OF CLARK COUNTY, NEVADA.	10D. INDIVIDUAL'S SURNAME			_		
COUNTRY    ADDITIONAL SECURED PARTY'S NAME or   ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)			$\checkmark$ /	7		
ASSIGNOR SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)  11a. ORGANIZATION'S NAME  11b. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  ADDITIONAL NAME(S)/INITIAL(S)  SUFFIX  C. MAILING ADDRESS  CITY  STATE POSTAL CODE  COUNTRY  ADDITIONAL SPACE FOR ITEM 4 (Collateral):  14. This FINANCING STATEMENT: Covers timber to be cut covers as-extracted collateral to serious filling  15. Name and address of a RECORD OWNER of real estate described in liem 16 (If Debict does not have a record indress):  MEKO MCLEMORE, 2933 MONTMORENCY  STREET, HENDERSON, NV 89044  16. Description of real estate: PARCEL 1:  LOT 75 IN BLOCK 4, OF FINAL MAP OF PROVENCE COUNTRY CLUB PARCEL 3, AS SHOWN BY MAP THEREOF ON FILE IN BOOK 127 OF PLATS, PAGE 65, IN THE OFFICE OF THE COUNTY RECORDER OF CLARK COUNTY, NEVADA.						
Tita. ORGANIZATION'S NAME  Tita. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  FIRST PERSONAL NAME  ADDITIONAL NAME(S)/INITIAL(S)  SUFFIX  C. MAILING ADDRESS  CITY  STATE  POSTAL CODE  COUNTRY  ADDITIONAL SPACE FOR ITEM 4 (Collateral):  14. This FINANCING STATEMENT:  COVERS timber to be cut  COVERS as extracted collateral  ARCEL 1:  STREET, HENDERSON, NV 89044  LOT 75 IN BLOCK 4, OF FINAL MAP OF PROVENCE COUNTRY  CLUB PARCEL 3, AS SHOWN BY MAP THEREOF ON FILE IN  BOOK 127 OF PLATS, PAGE 65, IN THE OFFICE OF THE  COUNTY RECORDER OF CLARK COUNTY, NEVADA.	c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
This Financing statement is to be filed (for record) or recorded) in the  2. Additional Space for Item 4 (Collateral):  14. This Financing Statement  Real Estate Records (if applicable)  5. Name and address of a RECORD OWNER of real estate described in item 16  (If Debtor does not have a record ingress):  MIEKO MCLEMORE, 2933 MONTMORENCY  STREET, HENDERSON, NV 89044  16. Description of real estate:  PARCEL 1:  LOT 75 IN BLOCK 4, OF FINAL MAP OF PROVENCE COUNTER CLUB PARCEL 3, AS SHOWN BY MAP THEREOF ON FILE IN BOOK 127 OF PLATS, PAGE 65, IN THE OFFICE OF THE COUNTY RECORDER OF CLARK COUNTY, NEVADA.		OR SECURED PARTY'S	NAME: Provide or	ly <u>one</u> nam	ne (11a or 11b)	
Ic. MAILING ADDRESS  CITY  STATE POSTAL CODE  COUNTRY  3.  This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable)  5. Name and address of a RECORD OWNER of real estate described in item 16 (if Debich does not have a record interest):  WIEKO MCLEMORE, 2933 MONTMORENCY  STREET, HENDERSON, NV 89044  14. This FINANCING STATEMENT:    covers timber to be cut   covers as-extracted collateral   left in item 16 (if Debich does not have a record interest):  PARCEL 1:  LOT 75 IN BLOCK 4, OF FINAL MAP OF PROVENCE COUNTY CLUB PARCEL 3, AS SHOWN BY MAP THEREOF ON FILE IN BOOK 127 OF PLATS, PAGE 65, IN THE OFFICE OF THE COUNTY RECORDER OF CLARK COUNTY, NEVADA.	11a. ORGANIZATION'S NAME		1	- 2		
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  3.  This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)  3. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):  MEKO MCLEMORE, 2933 MONTMORENCY  STREET, HENDERSON, NV 89044  14. This FINANCING STATEMENT:  Overs timber to be cut overs as-extracted collateral is filed as a fixture filing.  16. Description of real estate:  PARCEL 1:  LOT 75 IN BLOCK 4, OF FINAL MAP OF PROVENCE COUNTY CLUB PARCEL 3, AS SHOWN BY MAP THEREOF ON FILE IN BOOK 127 OF PLATS, PAGE 65, IN THE OFFICE OF THE COUNTY RECORDER OF CLARK COUNTY, NEVADA.	R 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(	(S) SUFFIX
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REAL ESTATE RECORDS (if applicable)  Covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):  MIEKO MCLEMORE, 2933 MONTMORENCY  STREET, HENDERSON, NV 89044  LOT 75 IN BLOCK 4, OF FINAL MAP OF PROVENCE COUNTF CLUB PARCEL 3, AS SHOWN BY MAP THEREOF ON FILE IN BOOK 127 OF PLATS, PAGE 65, IN THE OFFICE OF THE COUNTY RECORDER OF CLARK COUNTY, NEVADA.	. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	/ /		•		-
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		PARCEL II:				

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AME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if lin	e 1b was left blank			\ \	
use Individual Debtor name did not fit, check here				.\ \	
9a, ORGANIZATION'S NAME				\ \	
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			THE REAL PROPERTY.	_	
9b. INDIVIDUAL'S SURNAME					
MCLEMORE			Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, which i		
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10a. ORGANIZATION'S NAME					
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11b. INDIVIDUAL'S SURNAME	FIRST PERSONALIVANIE		ADDITIO	IVAL IVANIE(S)/IVI ITAL(S)	John
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ADDITIONAL SPACE FOR ITEM 4 (Collateral):		/			
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This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATEMENT:				
Name and address of a RECORD OWNER of real estate described in item 16	covers timber to be cut covers as-extracted collateral is filed as a fixture filing  16. Description of real estate:				
(if Debtor does not have a record interest):	'	/F FASEME	NT FO	R UTILITIES, ING	RESS.
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