2024-167169 LINCOLN COUNTY, NV Rec:\$90.00 06/18/2024 07:37 AM Total:\$90.00 Pas=3 AK CSC 191-22-714-078 UCC FINANCING STATEMENT **FOLLOW INSTRUCTIONS** OFFICIAL RECORD A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) AMY ELMER, RECORDER 1-800-858-5294 CSC B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 2842 89609 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Nevada (Lincoln) SEE BELOW FOR SECURED PARTY CONTACT INFORMATION THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) not fit in line 1b, leave all of item 1 blank, check here 1a. ORGANIZATION'S NAME OR ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME LAYAGUE **JEBRIEL** COUNTRY POSTAL CODE 1c. MAILING ADDRESS 3651 BITONTO LN CITY ΝV 89044 USA HENDERSON 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) not fit in line 2b, leave all of item 2 blank, check here 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE 2c. MAILING ADDRESS CITY POSTAL CODE COUNTRY 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME FIFTH Third Bank, N.A. OR ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME 3b. INDIVIDUAL'S SURNAME POSTAL CODE COUNTRY 3c. MAILING ADDRESS Fifth Third Bank Dividend, 38 CITY 45263 USA Cincinnati OH Fountain Sq Plaza, 1MOBA5 4. COLLATERAL: This financing statement covers the following collateral: The collateral described below is located at the Debtors address listed above. ALL OF THE DEBTORS RIGHT TITLE AND INTEREST IN PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT (IF ANY) INCLUDING BUT NOT LIMITED TO ROOFTOP SOLAR PANELS ELECTRICAL INVERTERS CABLES AND WIRES SUPPORT BRACKETS RELATED EQUIPMENT MONITORING EQUIPMENT SMART METERS AND ADDITIONS OR REPLACEMENTS OF THE SAME. IN ADDITION THE SECURITY INTEREST INCLUDES ALL WARRANTIES ISSUED WITH RESPECT TO THE REFERENCED COLLATERAL ANY RENEWABLE ENERGY OR CARBON CERTIFICATES OR CREDITS (REFERRED TO AMONG OTHER THINGS AS SRECS) ANY RENEWABLE ENERGY PRODUCTION INCENTIVES (PERFORMANCE-BASED INCENTIVES) AND ANY OTHER ECONOMIC BENEFITS RELATED TO INCENTIVES TO SUPPORT RENEWABLE ENERGY PRODUCTION THAT BORROWER MAY RECEIVE OR BE ENTITLED TO AS A RESULT OF THE PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT. THIS SECURITY AGREEMENT DOES NOT CREATE A SECURITY INTEREST IN THE DEBTORS REAL PROPERTY TO BE RECORDED IN THE LAND RECORDS.

8. OPTIONAL FILER REFERENCE DATA:

Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)

Consignee/Consignor

A Debtor is a Transmitting Utility

Seller/Buyer

being administered by a Decedent's Personal Representative

Non-UCC Filing

Licensee/Licensor

2842 89609

6b. Check only if applicable and check only one box

Agricultural Lien

Bailee/Bailor

Manufactured-Home Transaction

Lessee/Lessor

5. Check only if applicable and check only one box:

6a. Check only if applicable and check only one box

7. ALTERNATIVE DESIGNATION (if applicable):

Public-Finance Transaction

UCC FINANCING STATEMENT ADDENDU FOLLOW INSTRUCTIONS  9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement	
9a. ORGANIZATION'S NAME	
OR 9b. INDIVIDUAL'S SURNAME LAYAGUE	
FIRST PERSONAL NAME  JEBRIEL  ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name do not omit, modify, or abbreviate any part of the Debtor's name) and enter the 10a. ORGANIZATION'S NAME	e or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; mailing address in line 10c
OR 10b. INDIVIDUAL'S SURNAME	
INDIVIDUAL'S FIRST PERSONAL NAME	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  10c. MAILING ADDRESS	CITY STATE POSTAL CODE COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME or ASSI	IGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
11c. MAILING ADDRESS  12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	CITY STATE POSTAL CODE COUNTRY
<ul> <li>This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)</li> <li>Name and address of a RECORD OWNER of real estate described in item 16</li> </ul>	14. This FINANCING STATEMENT:  ☐ 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): JEBRIEL LAYAGUE, 3651 BITONTO LN, HENDERSON, NV 89044	ALL THAT REAL PROPERTY SITUATED IN THE CITY OF HENDERSON, COUNTY OF CLARK, STATE OF NEVADA, BOUNDED AND DESCRIBED AS FOLLOWS (THE "PROPERTY"):
	PARCEL 1:
	LOT 100, AS SHOWN ON THE FINAL MAP OF INSPIRADA 6-5 UNIT 1, AS SHOWN BY MAP THEREOF ON FILE IN BOOK 164
17. MISCELLANEOUS:	

## **FOLLOW INSTRUCTIONS** 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a, ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME LAYAGUE FIRST PERSONAL NAME **JEBRIEL** ADDITIONAL NAME(S)/INITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c OR 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS POSTAL CODE COUNTRY ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME SUFFIX 11b, INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) COUNTRY POSTAL CODE 11c. MAILING ADDRESS 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral 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): OF PLATS, PAGE 16, IN THE OFFICE OF THE COUNTY RECORDER OF CLARK COUNTY, NEVADA. PARCEL 2: AN EASEMENT FOR INGRESS AND EGRESS OVER PRIVATE STREETS AND COMMON AREAS AS SHOWN AND DELINEATED ON SAID PIN: 191-22-714-078 17. MISCELLANEOUS:

UCC FINANCING STATEMENT ADDENDUM