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Record at the request of and when recorded return to: GoodLeap, LLC

12/14/2023 08:49 AM Pages: 1 of 2 Fees: \$204.50 Skagit County Auditor UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) B. E-MAIL CONTACT AT FILER (optional) filings@goodleapsupport.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) GoodLeap, LLC PO Box # 981440 El Paso, TX 79998- 1440 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 not fit in line 1b, leave all of item 1 blank, check here 🔲 and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME OR 15. INDIVIDUAL'S SURNAME IRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) Chandler Michael 1c. MAILING ADDRESS POSTAL CODE COUNTRY USA MOUNT VERNON WA 98273-9439 4705 MOUNT BAKER LOOP 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 not fit in line 2b, leave all of item 2 blank, check here 🦳 and provide the Individual Debtor Information in item 10 of the Financing Statement Addendum (Form UCC1Ad) OR 26. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Dana Chandler 2c. MAILING ADDRESS CITY POSTAL CODE STATE COUNTRY **USA** MOUNT VERNON WA 98273-9439 4705 MOUNT BAKER LOOP 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 GoodLeap, LLC 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) POSTAL CODE STATE COUNTRY 3c. MAILING ADDRESS CITY USA 95746 8781 Sierra College Boulevard Roseville 4. COLLATERAL: This financing statement covers the following collateral: All of the debtor's right, title and interest in the Photovoltaic Solar Energy Equipment or Energy Storage/Battery Equipment (If any), including but not limited to rooftop solar panels, solar roofing materials, wall mounted batteries, stand alone batteries, inverters, cables and wires, support brackets, roof mounted or ground mounted racking systems, related equipment, and additions or replacements of the same. In addition, the security interest includes all warranties issued with respect to the referenced collateral. 48870000710000

(0.1400 AC) LOT 71, SKAGIT HIGHLANDS, DIVISION II, ACCORDING TO THE PLAT THEREOF, RECORDED ON APRIL 4, 2006, UNDER AUDITORS F

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 ar	nd Instructions) being administered by a Decedent's Personal Repr	esentative
6a. Check only if applicable and check only one box:	6b. Check only if applicable and check only one bo	G
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transaction	nsmitting Utility Agricultural Lien Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor	Seller/Buyer Ballee/Ballor Licensee/Li	ensor
8. OPTIONAL FILER REFERENCE DATA:		
Acct # 2212121680		
Acct # 2212121680		

UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS 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 Chandler FIRST PERSONAL NAME Michael 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 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS STATE POSTAL CODE COUNTRY CITY ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11. ADDITIONAL SECURED PARTY'S NAME OF 11s, ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. X This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 14. This FINANCING STATEMENT: Is filed as a fixture filing covers timber to be cut covers as-extracted collateral 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): 16. Description of real estate: County of: SKAGIT Michael Chandler and Dana Chandler Real Estate: 4705 MOUNT BAKER LOOP, MOUNT VERNON, WA, 98273-9439 APN: 48870000710000 (0.1400 AC) LOT 71, SKAGIT HIGHLANDS, DIVISION II, ACCORDING TO THE PLAT THEREOF, RECORDED ON APRIL 4, 2006, UNDER AUDITORS ${\tt F}$ 17. MISCELLANEOUS: