

**UCC FINANCING STATEMENT**

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) 53679 - Launch - Enium	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	93293571 <b>WAWA FIXTURE</b>
File with: Skagit, WA	

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	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	Beck	Michael	R	
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
920 N 8th St		Mount Vernon	WA	98273
				COUNTRY
				USA

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)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY
				USA

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				
Genisys Credit Union				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2100 Executive Hills Blvd		Auburn Hills	MI	48326
				COUNTRY
				USA

4. COLLATERAL: This financing statement covers the following collateral:

APN: P25565

Abbreviated Legal Description: PTN SW SW 17/34/4 SKAGIT COUNTY, WA

PURCHASE MONEY SECURITY INTEREST IN SOLAR PRODUCT FIXTURES: ALL OF THE DEBTOR'S RIGHT, TITLE AND INTEREST IN PHOTOVOLTAIC SOLAR ENERGY EQUIPMENT (IF ANY), INCLUDING BUT NOT LIMITED TO ROOFTOP OR GROUND MOUNT SOLAR PANELS, ELECTRICAL INVERTERS, MICROINVERTERS OR POWER OPTIMIZERS, CABLES AND WIRES, SUPPORT BRACKETS, RELATED EQUIPMENT, AND ADDITIONS OR REPLACEMENTS OF THE SAME. IN ADDITION, THE SECURITY INTEREST INCLUDES ALL WARRANTIES ISSUED WITH RESPECT TO THE REFERENCED COLLATERAL.

5. Check only if applicable and check only one box: Collateral is  held in a Trust (see UCC1Ad, item 17 and instructions)  being administered by a Decedent's Personal Representative

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

Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

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

Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

93293571

LoanID 429839

LenderCode GENSCU



**UCC FINANCING STATEMENT ADDENDUM**

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	
OR	
9b. INDIVIDUAL'S SURNAME Beck	
FIRST PERSONAL NAME Michael	
ADDITIONAL NAME(S)/INITIAL(S) R	SUFFIX

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				
OR				
10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
10c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
COUNTRY				

11.  ADDITIONAL SECURED PARTY'S NAME or  ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. 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.  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):

16. Description of real estate:  
**Parcel ID:**  
**P25565**  
  
**Legal Description**  
**THAT PORTION OF THE SOUTHWEST QUARTER**  
**OF THE SOUTHWEST QUARTER OF SECTION 17,**  
**TOWNSHIP 34 NORTH, RANGE 4 EAST, W.M.,**  
**DESCRIBED AS FOLLOWS: BEGINNING AT A**  
**[ See Exhibit for Real Estate ]**

17. MISCELLANEOUS: 93293571-WA-57 53679 - Launch - Enium    Genisys Credit Union    File with: Skagit, WA    LoanID 429839    LenderCode GENSCU



**Debtor:** Beck, Michael, R

**Exhibit for Real Estate**

**16. Description of real estate:** Continued

POINT ON THE EAST LINE OF SAID SUBDIVISION,  
1,094.84 FEET SOUTH OF THE NORTHEAST  
CORNER THEREOF; THENCE SOUTH 0 DEGREES  
17'09" WEST ALONG THE SAID EAST LINE 110 FEET;  
THENCE NORTH 89 DEGREES 44'15" WEST,  
PARALLEL TO THE SOUTH LINE OF SAID  
SUBDIVISION 116.79 FEET TO THE TRUE POINT OF  
BEGINNING; THENCE CONTINUING NORTH 89  
DEGREES 44'15" WEST 80 FEET TO A POINT ON THE  
EAST LINE OF A STRIP OF LAND CONVEYED TO  
SKAGIT COUNTY FOR THE EXTENSION OF 8TH  
STREET AS ESTABLISHED IN THE CITY OF MOUNT  
VERNON; THENCE NORTH 0 DEGREES 38'45" EAST  
ALONG SAID EAST LINE 110 FEET; THENCE SOUTH  
89 DEGREES 44'15" EAST 80 FEET; THENCE SOUTH  
0 DEGREES 38'45" WEST 110 FEET TO THE TRUE  
POINT OF BEGINNING.  
APN: P25565

