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08/28/2023 03:48 PM Pages: 1 of 3 Fees: \$205.50

Skagit County Auditor, WA

CC FINANCING STATEMENT DLLOW INSTRUCTIONS					
. NAME & PHONE OF CONTACT AT FILER (opt lame: Wolters Kluwer Lien Solutions Phone		7			
. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com		7			
SEND ACKNOWLEDGMENT TO: (Name and A	ddress) 25556 - SOLAR MOSAIC	1			
Lien Solutions					
P.O. Box 29071	94767093				
Glendale, CA 91209-9071	WAWA				
	FIXTURE _I				
File with: Skagit, W		THE ABOVE	SPACE IS FO	OR FILING OFFIC	E USE ONLY
DEBTOR'S NAME: Provide only one Debtor name	^ <u></u>				
name will not fit in line 1b, leave all of item 1 blank, che 1a. ORGANIZATION'S NAME	ck here and provide the Individual Deb	itor information in item 10 of t	he Financing Sta	itement Addendum (F	om UCC1Ad)
is. Stocking the state of the s					
1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME		NAL NAME(S)/INITIAL(S) SUFFIX
Bianconi		Matthew			
. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
718 River Vista Loop	Mount Verr		WA	98273	USA
DEBTOR'S NAME: Provide only one Debtor name	_				
name will not fit in line 2b, leave all of item 2 blank, che	ck here and provide the Individual Deb	tor information in item 10 of t	he Financing Sta	itement Addendum (F	orm UCC1Ad)
2a. ORGANIZATION'S NAME					
2b, INDIVIDUAL'S SURNAME	FIRST DEPON	AL NAME	LADDITIO	NAL NAME(S)/INITIAL(S) SUFFIX
Bianconi		FIRST PERSONAL NAME Emily		ADDITIONAL NAME(S)/INTITAL(S)	
I Dianconi	I Emily				
	Emily		STATE	POSTAL CODE	COUNTRY
MAILING ADDRESS	CITY	non			
MAILING ADDRESS 718 River Vista Loop	CITY Mount Verr		WA	98273	COUNTRY
MAILING ADDRESS 718 River Vista Loop	CITY Mount Verr		WA	98273	
L MAILING ADDRESS 1718 River Vista Loop SECURED PARTY'S NAME (or NAME of ASSIG	CITY Mount Verr		WA	98273	
MAILING ADDRESS 7.718 River Vista Loop SECURED PARTY'S NAME (or NAME of ASSIGNATION'S NAME Solar Mosaic LLC	CITY Mount Verr	rovide only <u>one</u> Secured Part	WA y name (3a or 3l	98273	USA
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MAILING ADDRESS 718 River Vista Loop SECURED PARTY'S NAME (or NAME of ASSIC Sa. ORGANIZATION'S NAME SOLAR MOSAIC LLC 3b. INDIVIDUAL'S SURNAME MAILING ADDRESS 01 12th Street, Suite 325	CITY Mount Verr SNEE of ASSIGNOR SECURED PARTY): PI FIRST PERSON CITY Oakland	rovide only <u>one</u> Secured Part	y name (3a or 3l	98273 D) NAL NAME(SYINITIAL(S	USA) SUFFIX
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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 ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME Bianconi FIRST PERSONAL NAME Matthew 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) 10c. MAILING ADDRESS ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) 11c. MAILING ADDRESS POSTAL CODE 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 4. All rebates and incentives that are payable as a result of installing the Collateralized Goods except for such rebates and incentives which have been assigned to debtor's solar contractor or operations and maintenance contractor; 5. All debtor's rights, title, interests, and remedies under all agreements, statements and other documentation relating to the Collateralized Goods (including, without limitation, the Home Improvement Agreement and Operations and Maintenance Agreement); and 6. All consideration received from the collection, sale or other disposition of any property that constitutes Collateralized Goods, including any payment received from any insurer arising from any loss, damage or destruction of any Collateralized Goods and any other payment received as a result of 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) 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 16. Description of real estate: (if Debtor does not have a record interest): Parcel ID: Matthew Bianconi P122819 2718 River Vista Loop Mount Vernon, WA 98273 (0.2300 AC) NORTH HILL PUD, LOT 19, (DR20) AF#200505050094, BEING PORTION OF SECTION 9, TOWNSHIP 34 NORTH, RANGE 4 EAST. State: WA

County: Skagit County

Solar Mosaic LLC

File with: Skagit, WA

393069 713214

17. MISCELLANEOUS: 94767093-WA-57 25556 - SOLAR MOSAIC

UCC FINANCING STATEMENT ADDENDUM

UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS							
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line because Individual Debtor name did not fit, check here	e 1b was left bl	ank					
9a. ORGANIZATION'S NAME							
R CA INDUSTRIANCE CUENAME							
96. INDIVIDUAL'S SURNAME Bianconi							
FIRST PERSONAL NAME							
Matthew							
ADDITIONAL NAME(SVINITIAL(S)	П	SUFFIX					
			THE ABOVE SPACE IS FOR FILING OFFICE USE ONL				
D. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or idenotomit, modify, or abbreviate any part of the Debtor's name) and enter the ma 10a. ORGANIZATION'S NAME			1 b or 2b of the Fi	nancing St	atement (Form UCC1) (us	e exact, full name
R 10b. INDIVIDUAL'S SURNAME							
INDIVIDUAL'S FIRST PERSONAL NAME							
INDIVIDUAL'S ADDITIONAL NAME(SYNNITIAL(S)							SUFFIX
IDC. MAILING ADDRESS	CITY			STATE	POSTAL	CODE	COUNTRY
ASSIGNO 11a. ORGANIZATION'S NAME T1b. INDIVIDUAL'S SURNAME	FIRST PERSON	O PARTY'S NAM	E: Provide only			11b) (Syinitial(S)	SUFFIX
1c. MAILING ADDRESS	CITY			STATE	POSTAL	CODE	COUNTRY
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral): cossessing any Collateralized Goods or any proceeds of Collateralialialialialialialialialialialialialia	personal proj collateral. T	he collateral de	scribed abov				
3. X This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14. This FINA	NCING STATEME	NT:				
REAL ESTATE RECORDS (if applicable)		s timber to be cut	covers as-	extracted o	collateral	is filed as	a fixture filing
5. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	16. Descriptio	n of real estate:	_				-
	Emily 2718 F	nal Real F Bianconi tiver Vista Vernon,W	Loop	Ownei	r:		
7. MISCELLANEOUS: 94767093-WA-67 25556 - SOLAR MOSAIC Solar N	Mosaic LLC	File	with: Skagit, WA	393069	713214		