## 202402290028

being administered by a Decedent's Personal Representative

Licensee/Licensor

Agricultural Lien

Bailee/Bailor

Seller/Buyer

	Record at the request when recorded return GoodLeap, LLC	of a: 02/29/2024 11: a to: Skagit County Aud	17 AM Pages:	1 of 2 Fees:	\$304.50
UCC FINANCING STATE	MENT				
A. NAME & PHONE OF CONTACT AT	FILER (optional)				
B. E-MAIL CONTACT AT FILER (option	ıal)				
filings@goodleapsupport.com					
C. SEND ACKNOWLEDGMENT TO: (	Name and Address)				
Condition IVC		$\neg$ I			
GoodLeap, LLC PO Box # 981440		'			
El Paso, TX 79998- 1440					
		,			
		THE A	ROVE SDACE IS EC	R FILING OFFICE USE	ONI Y
1. DEBTOR'S NAME: Provide only one	Debtor name (1a or 1b) (use exact, full nar	<del></del>			
name will not fit in line 1b, leave all of item		Individual Debtor information in item			
1a. ORGANIZATION'S NAME					
OR.					
OR 1b. INDIVIDUAL'S SURNAME		IRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Sullivan		Dudley			
10. MAILING ADDRESS		Todas Wooller	STATE	POSTAL CODE 98284	COUNTRY
20875 Echo Hill Rd		Sedro Woolley	WA	96264	03/1
OR 2b. INDIVIDUAL'S SURNAME	F	IRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	c	ITY	STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NA	ME of ASSIGNEE of ASSIGNOR SECURE	D PARTY): Provide only one Secur	ed Party name (3a or 3b	) )	
3a. ORGANIZATION'S NAME					
GoodLeap, LLC					
3b. INDIVIDUAL'S SURNAME	F	IRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Re MAII ING ADDRESS		eity	STATE	POSTAL CODE	COUNTRY
					USA
	A College of the state of the s	Roseville	- CA	73740	
3c. MAILING ADDRESS  8781 Sierra College Boulevard  4. COLLATERAL: This financing statement  All of the debtors right, titl  Equipment (If any), including	t covers the following collatersi: le and interest in the Photoving but not limited to rooft	op solar panels, solar r	oofing material	ls, wall mounted b	ery
stand alone batteries, inver- related equipment, and add issued with respect to the re	ters, cables and wires, supplitions or replacements of the	oort brackets, roof mou	inted or ground	mounted racking	system
36042140010300	(5.0300 AC) (TITLE ELIMINATIO 09L28029XU TRACT 3 OF SKAGI	N) INCLUDING MANUFAC IT COU	TURED HOME 199	4 LIBERTY 66X28 SER	JAL NUMB

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and Instructions)

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

8. OPTIONAL FILER REFERENCE DATA: Acct # 2304171112

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor

Public-Finance Transaction

		02/29/2024 11:17 AM Page 2 of 2			
i					
,			,		
	JCC FINANCING STATEMENT AD FOLLOW INSTRUCTIONS	DENDUM			
-	P. NAME OF FIRST DEBTOR: Same as line 1a or 1b on F	inancing Statement; if line 1b was left blank	1		
	because Individual Debtor name did not fit, check here  9a. ORGANIZATION'S NAME		4		
	53.51.51.11.11.11.11.11.11.11.11.11.11.11.				
C	9b. INDIVIDUAL'S SURNAME Sullivan		1		
	FIRST PERSONAL NAME		1		
	Dudley  ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	1		
				IS FOR FILING OFFICE L	
1	<ol> <li>DEBTOR'S NAME: Provide (10a or 10b) only one add do not omit, modify, or abbreviate any part of the Debtor's</li> </ol>		n line 1b or 2b of the Financing S	Statement (Form UCC1) (use	exact, fu
	10a. ORGANIZATION'S NAME				
(	DR 10b. INDIVIDUAL'S SURNAME		<del></del>	· · · · · · · · · · · · · · · · · · ·	
	INDIVIDUAL'S FIRST PERSONAL NAME				
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUF
=	0c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COU
1	uc. MAILING ADDRESS	CITY	SIAIE	POSTAL GODE	
1	1. ADDITIONAL SECURED PARTY'S NAME	or ASSIGNOR SECURED PARTY	'S NAME: Provide only one n	ame (11a or 11b)	
	11a. ORGANIZATION'S NAME				
(	11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFI
7	1c. MAII ING ADDRESS	CITY	STATE	POSTAL CODE	ÇOU
-1	1c. MAILING ADDRÉSS	СІТУ	STATE	POSTAL CODE	cou
_	1c. MAILING ADDRESS  2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	СПҮ	STATE	POSTAL CODE	cou
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_		CITY	STATE	POSTAL CODE	cou
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- -	2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):			POSTAL CODE	cou
- -	2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  13. X This FINANCING STATEMENT is to be filed [for reconnected to the connected	rd] (or recorded) in the      14. This FINANCING STAT	EMENT: a cut covers as-extracted		
- -	2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  13. X This FINANCING STATEMENT is to be filed [for recon	rd] (or recorded) in the    14. This FINANCING STAT    covers timber to be   escribed in Item 16    16. Description of real esta	EMENT: a cut covers as-extracted te:		
- - -	2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  13.   This FINANCING STATEMENT is to be filed [for recon REAL ESTATE RECORDS (if applicable)  15. Name and address of a RECORD OWNER of real estate decords.	rd] (or recorded) in the      14. This FINANCING STAT	EMENT: a cut covers as-extracted te:		
- - -	2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  13. X This FINANCING STATEMENT is to be filed [for recon REAL ESTATE RECORDS (if applicable)  15. Name and address of a RECORD OWNER of real estate de (if Debtor does not have a record interest):	rd] (or recorded) in the covers timber to be escribed in Item 16 county of: Ska	EMENT: a cut  covers as-extracted te: git	collateral X is filed as a	
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- - -	2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  13. X This FINANCING STATEMENT is to be filed [for recon REAL ESTATE RECORDS (if applicable)  15. Name and address of a RECORD OWNER of real estate de (if Debtor does not have a record interest):	rd] (or recorded) in the covers timber to be escribed in Item 16  16. Description of real esta  County of: Ska  Address of Real Estate: 2087:  APN: 360  (5.0300 AC) (TITLE	TEMENT: a cut covers as-extracted te: git  5 Echo Hill Rd, Sedro Wool	collateral is filed as a ley, WA, 98284	of fixture to the fixture of the fix