Record at the reque	est of and					
when recorded retu	ırn to:					
GoodLeap, LLC						
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			*1 = 1 = 7 + 1			
PO Box # 981440)62400018858(by Cnty Judge		
El Paso, TX 79998- 1440				/2024 01:23		
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION		Tur				- -
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full r			the Debto	r's name); if any pa	rt of the Indi	ividual Debtor's
name will not fit in line 1b, leave all of item 1 blank, check here and provide to 1a. ORGANIZATION'S NAME	the Individual Debtor information	ation in item 10 of the Fi	inancing St	atement Addendum	n (Form UCC	>1Ad)
OR 15 INDIVIDUALIS SUBMANE	Trinata		1.55	AIAI AIAA	ria. (A)	Tours
1ь. INDIVIDUAL'S SURNAME Romano	James		ADDITIO	NAL NAME(S)/INIT	TIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE		COUNTRY
2828 Altadena South Way	HOOVER		AL	35244		USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name will not fit in line 2b, leave all of item 2 blank, check here and provide to	name; do not omit, modify, d the Individual Debtor Informa					
2a. ORGANIZATION'S NAME			 	· ·· · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
OR 06 4ND 0 4D 14 10 0 4 10 N 14 15	TEIDOT DEDOCALAL ALALIE	<u> </u>	LABBITIO	A444 A444 A444 A444 A444 A444 A444 A44	FIAL (O)	Touren
26. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INIT	HAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE		COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	RED PARTY): Provide only	one Secured Party nam	ne (3a or 3t)		
3a. ORGANIZATION'S NAME			-	<u> </u>		• •
GoodLeap, LLC	T	· · · · · · · · · · · · · · · · · · ·	·			T=:==
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INIT	rial(S)	SUFFIX
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	<u>.</u>	COUNTRY
8781 Sierra College Boulevard	Roseville		CA	95746		USA
4. COLLATERAL: This financing statement covers the following collateral:	<u> </u>					
All of the Debtor's right, title and interest in and to Go Debtor pursuant to the Home Improvement Agreemen Debtor(s), including (a) HVAC (b) all accessions, atta- additions to such goods; (c) all proceeds from warrant Agreement or any operations and maintenance agreement goods, such Home Improvement Agreement or any op- from the collection, sale or other disposition of such goods from any loss, damage or destruction of such goods and goods, or any other proceeds of such goods	chments, accessory claims related to ent; (e) all agreed berations and main oods, including a	Loan Agreementes, tools, part o such goods; (ments and other ntenance agreement received by payment received.	ent beto s, supp (d) such ment; (eived	ween Secure lies, replace I Home Importation re f) all considers	ed Party ements of rovements lating to leration surer ari	and of and ent o such received ising
The Maximum Principal Indebtedness for Recordi	ng Tax Purposes	is \$ 23,684	1.00			
5. Check only if applicable and check only one box: Collateral is held in a Trust (s	see UCC1Ad, item 17 and I	nstructions) being	g administe	red by a Decedent	's Personal I	Representative
6a. Check <u>only</u> if applicable and check <u>only</u> one box:			heck <u>only</u>	if applicable and ch	eck <u>only</u> on	e box:
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transm				Non-UCC F	
	Consignee/Consignor	Seller/Buyer	Ba	ilee/Bailor	License	e/Licensor
8. OPTIONAL FILER REFERENCE DATA: Acct # 2405183781						

UCC FINANCING STATEMENT ADDENDUM

	itement; if line 1b was left blank			
9a. ORGANIZATION'S NAME				
9b. INDIVIDUAL'S SURNAME Domono				
Romano FIRST PERSONAL NAME	<u></u>	202	40624000188580 2	/2 \$74.55
James		She	lby Cnty Judge of 24/2024 01:23:42	f Probate, f
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
DEBTOR'S NAME: Provide (10a or 10b) only one additional Debto		الباد المستقل المستقل المستورين والمستقل	s FOR FILING OFFICE latement (Form UCC1) (us	
do not omit, modify, or abbreviate any part of the Debtor's name) and e				
10a. ORGANIZATION'S NAME				
10b. INDIVIDUAL'S SURNAME				<u>-</u>
INDIVIDUAL'S FIRST PERSONAL NAME		<u> </u>		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		<u> </u>		SUFFIX
. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ADDITIONAL SECURED PARTY'S NAME OF A	ASSIGNOR SECURED PARTY'S NAME:	Provide only one na	me (11a or 11b)	
11a. ORGANIZATION'S NAME 11a. ORGANIZATION'S NAME	100,0,1011 02001120 171111 0 111111			
445 INDIVIDUALIS CURNANS	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
I LAAK INDIVIDUALIS SURNAME		•		
11b, INDIVIDUAL'S SURNAME				
11B, INDIVIDUAL 5 SURNAME	CITY		POSTAL CODE	COUNTRY
c. MAILING ADDRESS			POSTAL CODE	COUNTRY
11B, INDIVIDUAL 5 SURNAME			POSTAL CODE	COUNTRY
c. MAILING ADDRESS			POSTAL CODE	COUNTRY
c. MAILING ADDRESS			POSTAL CODE	COUNTRY
MAILING ADDRESS			POSTAL CODE	COUNTRY
to MAILING ADDRESS			POSTAL CODE	COUNTRY
MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral):	CITY		POSTAL CODE	COUNTRY
MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or record REAL ESTATE RECORDS (if applicable)	city ded) in the 14. This FINANCING STATEMENT: covers timber to be cut			country a fixture filing
MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): X This FINANCING STATEMENT is to be filed [for record] (or record REAL ESTATE RECORDS (if applicable)	city ded) in the 14. This FINANCING STATEMENT: covers timber to be cut	STATE		
ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or record REAL ESTATE RECORDS (if applicable) Name and address of a RECORD OWNER of real estate described in it (if Debtor does not have a record interest):	city ded) in the 14. This FINANCING STATEMENT: covers timber to be cut	STATE		
ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or record REAL ESTATE RECORDS (if applicable) Name and address of a RECORD OWNER of real estate described in it (if Debtor does not have a record interest):	covers timber to be cut tem 16 16. Description of real estate:	state covers as-extracted	collateral X is filed as	
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ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or record REAL ESTATE RECORDS (if applicable) Name and address of a RECORD OWNER of real estate described in its	city ded) in the 14. This FINANCING STATEMENT: covers timber to be cut tem 16 16. Description of real estate: County of: SHELBY Address: 2828 Altadena State: APN: 102100000	covers as-extracted South Way, HOC	collateral X is filed as	s a fixture filing
ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or record REAL ESTATE RECORDS (if applicable) Name and address of a RECORD OWNER of real estate described in it (if Debtor does not have a record interest):	city ded) in the 14. This FINANCING STATEMENT:	covers as-extracted South Way, HOC	collateral X is filed as	s a fixture filing
ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or record REAL ESTATE RECORDS (if applicable) Name and address of a RECORD OWNER of real estate described in it (if Debtor does not have a record interest):	city ded) in the 14. This FINANCING STATEMENT: covers timber to be cut tem 16 16. Description of real estate: County of: SHELBY Address: 2828 Altadena S APN: 10210000000000000000000000000000000000	covers as-extracted South Way, HOC	collateral X is filed as	s a fixture filing