

Record at the request of and
when recorded return 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 PO Box # 981440 El Paso, TX 79998- 1440 SEE BELOW FOR SECURED PARTY CONTACT INFORMATION |

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 calhoun |
| FIRST PERSONAL NAME larry |
| ADDITIONAL NAME(S)/INITIAL(S) |
| SUFFIX |
| 1c MAILING ADDRESS 787 SIMMSVILLE RD |
| CITY ALABASTER |
| STATE AL |
| POSTAL CODE 35007 |
| 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 GoodLeap, LLC |
| OR 3b INDIVIDUAL'S SURNAME |
| FIRST PERSONAL NAME |
| ADDITIONAL NAME(S)/INITIAL(S) |
| SUFFIX |
| 3c MAILING ADDRESS 8781 Sierra College Boulevard |
| CITY Roseville |
| STATE CA |
| POSTAL CODE 95661 |
| COUNTRY USA |

4 COLLATERAL This financing statement covers the following collateral

All of the Debtors right, title and interest in and to Goods purchased with the proceeds of the loan by Secured Party to Debtor pursuant to the Home Improvement Agreement described in the Loan Agreement between Secured Party and Debtor(s), including (a) HVAC (b) all accessions, attachments, accessories, tools, parts, supplies, replacements of and additions to such goods; (c) all proceeds from warranty claims related to such goods; (d) such Home Improvement Agreement or any operations and maintenance agreement; (e) all agreements and other documentation relating to such goods, such Home Improvement Agreement or any operations and maintenance agreement; (f) all consideration received from the collection, sale or other disposition of such goods, including any payment received from any insurer arising from any loss, damage or destruction of such goods and any other payment received as a result of possessing any such goods, or any other proceeds of such goods

The Maximum Principal Indebtedness for Recording Tax Purposes is \$ 26,897.00

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/Licenser

8 OPTIONAL FILER REFERENCE DATA.

Acct # 2503017576

FIX

SHELBY

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 | |
| calhoun | |
| FIRST PERSONAL NAME | |
| larry | |
| ADDITIONAL NAME(S)/INITIAL(S) | 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):



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
03/03/2026 01:16:38 PM
\$79.35 JOANN
20260303000060860

Alvin S. Bayl

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):

larry calhoun

16. Description of real estate:

County of: SHELBY
Address: 787 SIMMSVILLE RD, ALABASTER, AL, 35007

APN: 137363001012000
COM SE COR NE1/4 SW1/4 W TO W R/W HWY 11 NE AL R/W
110 TO POB CONT AL R/W 105 NW 210 SW 105 SE TO POB

17. MISCELLANEOUS: **FIX**