

BK: 2023 PG: 480
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Pages 3
County Recording Fee: \$17.00
Iowa E-Filing Fee: \$3.00
Combined Fee: \$20.00
Revenue Tax:
BRANDY L. MACUMBER, RECORDER
Madison County, Iowa

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) 49471 - Launch Servicing, Lien Solutions 91773869 P.O. Box 29071 Glendale, CA 91209-9071 IAIA FIXTURE	
File with: Madison, IA	

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 BUFFINGTON			
	FIRST PERSONAL NAME BREANNE	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
1c. MAILING ADDRESS 307 S West St		CITY Macksburg	STATE IA	POSTAL CODE 50155
		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 LITTLE			
	FIRST PERSONAL NAME NICKOLAS	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
2c. MAILING ADDRESS 307 S West St		CITY Macksburg	STATE IA	POSTAL CODE 50155
		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 EnerBankUSA				
OR	3b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3c. MAILING ADDRESS 1245 Brickyard Road, Suite 600		CITY Salt Lake City	STATE UT	POSTAL CODE 84106
		COUNTRY USA		

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

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:

91773869

LoanID 355401

LenderCode ENRBK2

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	
BUFFINGTON	
FIRST PERSONAL NAME	
BREANNE	
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):

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:

Recorded: 10/26/2020
Book/Page: 2020/4088
Instrument #: 20204088

Legal Description as per last deed of record
**THE FOLLOWING DESCRIBED REAL ESTATE IN
MADISON COUNTY, IOWA: PARCEL "B" LOCATED
[See Exhibit for Real Estate]**



Debtor: BUFFINGTON, BREANNE

Exhibit for Real Estate

16. Description of real estate: Continued

IN THE NORTHEAST QUARTER (1/4) OF THE
NORTHEAST QUARTER (1/4) OF SECTION SIXTEEN
(16),
TOWNSHIP SEVENTY-FOUR (74) NORTH, RANGE
TWENTY-NINE (29) WEST OF THE 5TH P.M.,
MADISON COUNTY, IOWA, AND IN LOTS SIX (6),
SEVEN (7) AND 108 IN BLOCK ELEVEN (11) OF
MACK'S ADDITION TO MACKSBURG, MADISON
COUNTY, IOWA, CONTAINING 0.828 ACRES, MORE
OR LESS, AS SHOWN IN PLAT OF SURVEY FILED IN
BOOK 2020, PAGE 1647 ON MAY 14, 2020, IN THE
OFFICE OF THE RECORDER OF MADISON COUNTY,
IOWA.

APN: 910-00-03-11031000

