SPRFiling@cscglobal.com SEND ACKNOWLEDGMENT TO: (Name and Address) 2769 20116 CSC 801 Adlai Stevenson Drive		Skamania County, WA Total: \$308.50 Pgs=6 UCC Request of: eRecorded by: CSC Ingeo		2024-000203 02/26/2024 02:51 PM		
2769 20116 CSC						
	٦l			4.		
Springfield, IL 62703 Filed In: Washington (Skamania)				.\		
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION	_	THE ABOVI	E SPACE IS FO	OR FILING OFFICE U	SE ONLY	
DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use exact, full name; do not omil not fit in line 1b, leave all of item 1 blank, check here						
1a. ORGANIZATION'S NAME			$\overline{}$			
1b. INDIVIDUAL'S SURNAME THALHOFER THALHOFER COLIN		NAME	ADDITIO	DNAL NAME(S)/INITIAL(S) SUFFIX	
MAILING ADDRESS 16592 WASHOUGAL RIVER RD CITY WASHO	DUG/	AL.	STATE WA	POSTAL CODE 98671	COUNTR	
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit not fit in line 2b, leave all of item 2 blank, check here and provide the Individual De 2a. ORGANIZATION'S NAME						
2b. INDIVIDUAL'S SURNAME FIRST PERS	SONAL I	NAME	ADDITIC	DNAL NAME(S)/INITIAL(S) SUFFIX	
MAILING ADDRESS CITY			STATE	POSTAL CODE	COUNTR	
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): P 3a. ORGANIZATION'S NAME FIFTH THIRD BANK, NATIONAL ASSO			ame (3a or 3b)	\rightarrow		
3b. INDIVIDUAL'S SURNAME FIRST PERS	SONAL I	NAME	ADDITIO	DNAL NAME(S)/INITIAL(S) SUFFIX	
L MAILING ADDRESS 38 FOUNTAIN SQUARE PLAZA MOBA5 CITY CITY CINCIN	INAT	V	STATE	POSTAL CODE 45263	COUNTR	
COLLATERAL: This financing statement covers the following collateral:	- 1		·		·	
LL THAT PORTION OF THE NORTHWEST QUARTER OF DWNSHIP 2 NORTH, RANGE 5 EAST OF THE WILLAMET F WASHINGTON, LYING SOUTHEASTERLY OF THE WAS	TE N	IERIDIAN, IN T	HE COUN			
XCEPT THAT PORTION LYING WITHIN MABEE MINES RO	DAD.					
ARCEL II						
PORTION OF THE NORTHEAST QUARTER OF THE NOR ORTH, RANGE 5 EAST OF THE WILLAMETTE MERIDIAN,						
Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is held in a Trust (see UCC1Ad, i	item 17	and Instructions)	being administe	ered by a Decedent's Pers	onal Representati	
. Check <u>only</u> if applicable and check <u>only</u> one box: Public-Finance Transaction Manufactured-Home Transaction A Debte	or ic s T	ransmitting Utility		if applicable and check <u>on</u>	nly one box:	

FOLLOW INSTRUCTIONS		1	
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if I because Individual Debtor name did not fit, check here	line 1b was left blank		
9a. ORGANIZATION'S NAME			
		_	
OR CHANDING CHIDNAMS			
OR 9b. INDIVIDUAL'S SURNAME THALHOFER			
FIRST PERSONAL NAME			
COLIN			
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
		THE ABOVE SPACE IS FOR FILING OFFICE	E USE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or			
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the ma	illing address in line 10c		
10a. ORGANIZATION'S NAME			
OR 10b. INDIVIDUAL'S SURNAME			
TOD. INDIVIDUALS SURNAINE	# A 1	. 11 "	
INDIVIDUAL'S FIRST PERSONAL NAME		\smile	
	\sim		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	7 1		SUFFIX
4			
10c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
# F ADDITIONAL OF CURED DARTING NAME TO ACCOUNT	LOD OF CLIDED DADTY	2 NAME -	
11. ADDITIONAL SECURED PARTY'S NAME or ASSIGI	NOR SECURED PARTY	S NAME: Provide only <u>one</u> name (11a or 11b)	
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
4 4		_ \	
11c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): AS FOLLOWS:	2		•
AS FOLLOWS.			
BEGINNING AT THE POINT OF INTERSECTION O	OF THE WEST LINE	OF THE NORTHEAST QUARTER	OF THE
NORTHWEST QUARTER OF SAID SECTION 14 A			
11060, SAID POINT BEING SOUTH 0 01'22" EAST			
CORNER OF THE NORTHEAST QUARTER OF THE	HE NORTHWEST Q	UARTER OF SAID SECTION 14; TH	HENCE
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATE	MENT:	
	covers timber to be o		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: PARCEL I		
COLIN THALHOFER 16592 WASHOUGAL RIVER RD	FAROLLI		
WASHOUGAL, WA 98671	ALL THAT PORTI	ON OF THE NORTHWEST QUART	ER OF THE
WHO TO GOTE, WHO GOT T	NORTHWEST QU	JARTER OF SECTION 14, TOWNSH	HIP 2
		5 EAST OF THE WILLAMETTE MEI	
		SKAMANIA, STATE OF WASHING	
	SOUTHEASTERL	Y OF THE WASHOUGAL RIVER R	OAD.
	EXCEPT THAT D	ORTION LYING WITHIN MABEE MI	INES POAD
	LACE I HIATE	CITION ETHIO WITH HIN MADEL IVII	
17. MISCELLANEOUS:			

9a. ORGANIZATION'S NAME				
			_	
9b. INDIVIDUAL'S SURNAME		-		
THALHOFER				
FIRST PERSONAL NAME			_ /	
COLIN			7	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE SPACE	E IS FOR FILING OFFICE	E LISE ONLY
DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or do not omit, modify, or abbreviate any part of the Debtor's name) and enter the ma				
10a. ORGANIZATION'S NAME	annig address in time 100	~ 1	\smile	
10ь. INDIVIDUAL'S SURNAME	<u>a(</u>			
10b. INDIVIDUAL'S SURNAME	. 6 4 1	. "		
INDIVIDUAL'S FIRST PERSONAL NAME		$\overline{}$		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		-	4.	SUFFIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ADDITIONAL SECURED PARTY'S NAME or ASSIG	NOR SECURED PARTY	S NAME: Provide only <u>one</u> r	ame (11a or 11b)	
11a. ORGANIZATION'S NAME)			
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDI	TIONAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
WALLING ADDRESS	CITY	SIAI	POSTAL CODE	COUNTRY
ADDITIONAL SPACE FOR ITEM 4 (Collateral): LONG THE CENTER LINE OF THE WASHOUGA	L RIVER ROAD AL	ONG A CURVE TO	THE LEFT, HAV	ING A
ACK		<u> </u>		
NGENT OF SOUTH 56 45'31" WEST WITH A R				
OUTH 54 37'43" EAST A DISTANCE OF 30.52 FE ROP COR LS 22330" SET ON THE SOUTHERL				
DAD: THENCE CONTINUING SOUTH 54 37'43"				
ALUMINUM CAP STAMPED "PROP COR LS 22				
This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATE		d aniilataani	- Coton Clina
Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real estate		d collateral 🗾 is filed as	a lixture liling
if Debtor does not have a record interest):		RTION OF THE NO		
		ST QUARTER OF		
		5 EAST OF THE \		
	FOLLOWS:	NTY, WASHINGTO	JN, DESCRIBED I	AS
	BEGINNING AT 1	THE POINT OF IN	TERSECTION OF	THE WEST
		THE POINT OF INT PRTHEAST QUART		
	LINE OF THE NO		TER OF THE NOF	RTHWEST

T CEECT INCTITION OF THE PROPERTY OF THE PROPE				
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if	line 1b was left blank	1		
because Individual Debtor name did not fit, check here				
9a. ORGANIZATION'S NAME				
OR CLANDING CHIDNAMS			- 6.	
90. INDIVIDUAL 5 SURNAME				
THALHOFER			- 1	
FIRST PERSONAL NAME			-	
COLIN			\sim \sim	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	- A	/ A 1	þ.
		THE ABOVE	SPACE IS FOR FILING OF	FICE USE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or		e 1b or 2b of the Financi	ng Statement (Form UCC1) (use	exact, full name;
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the ma	illing address in line 10c	_		
10a. ORGANIZATION'S NAME		7		
OR TO THE PROPERTY OF THE PROP		1	<u> </u>	
10b. INDIVIDUAL'S SURNAME	- P" - 1	. 10	*	
INDIVIDUAL'S FIRST DEDSONAL NAME				
INDIVIDUAL'S FIRST PERSONAL NAME	. 37 .			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	-			SUFFIX
INDIVIDUAL S ADDITIONAL NAME(S)/INTITIAL(S)		b .	- 4	JOFFIX
10c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
Toc. Walling Addicess			STATE POSTAL CODE	COONTRI
TO A STATE OF THE PARTY OF THE	LOD OF SUIDED BARTON			
11. ADDITIONAL SECURED PARTY'S NAME or ASSIGI	NOR SECURED PARTY'S	S NAME: Provide onl	y <u>one</u> name (11a or 11b)	
Tra. ORGANIZATION'S NAME			-	
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	-45	ADDITIONAL NAME(S)/INITIAL	(S) SUFFIX
TID. INDIVIDORES SOLVE WILL	THE TENGOTO LE TOMBE	- 1	7.001.000.1010.1010.1010.10	001111
11c. MAILING ADDRESS	CITY	_~	STATE POSTAL CODE	COUNTRY
		7. 1		
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		_		
FEET TO A 5/8 INCH REBAR WITH A 2" ALUMINU	JM CAP STAMPED	"PROP COR L	S 22330"; THENCE	SOUTH 41
14'25" WEST A DISTANCE OF 302.93 FEE TO A 5				
COR LS 22330" ON THE WEST LINE OF THE NOI				
SECTION 14; THENCE NORTH 00 01'22" WEST A				
POINT OF BEGINNING, 02051422020000 The coll				
above. ALL OF THE DEBTORS RIGHT TITLE AND	INTEREST IN PHO	TOVOLTAIC	SOLAR ENERGY E	QUIPMENT
(IF				
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATE	MENT:		
REAL ESTATE RECORDS (if applicable)	covers timber to be o	cut covers as-e	xtracted collateral is file	d 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):	THE WASHOUGA	AL RIVER ROA	AD NO. 11060, SAII	D POINT
			A DISTANCE OF 19	
			RNER OF THE NOR	
			ST QUARTER OF	
			ITER LINE OF THE	
			E TO THE LEFT, HA	
			" WEST WITH A RA	
			131.7 FEET THEN	
		STANCE OF	30.52 FEET TO A 5/	/8 INCH
	REBAR			
17. MISCELLANEOUS:				
17. WIGGELLANLOOD.				

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if libecause Individual Debtor name did not fit, check here	ne 1b was left blank]		
9a. ORGANIZATION'S NAME				
OR OF THE PROPERTY OF THE PROP			4.	
96. INDIVIDUAL'S SURNAME THALHOFER FIRST PERSONAL NAME				
COLIN ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	• 4		
DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or I do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mai			PACE IS FOR FILING OFFIC 3 Statement (Form UCC1) (use exa	
10a. ORGANIZATION'S NAME		~ /		
OR 10b. INDIVIDUAL'S SURNAME	7		•	
INDIVIDUAL'S FIRST PERSONAL NAME		\vee		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			1	SUFFIX
10c. MAILING ADDRESS	CITY	s	TATE POSTAL CODE	COUNTRY
11a. ORGANIZATION'S NAME	IOR SECURED PARTY	S NAME: Provide only g	one name (11a or 11b)	<u> </u>
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	A	DDITIONAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	s	TATE POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): ANY) INCLUDING BUT NOT LIMITED TO ROOFTO WIRES SUPPORT BRACKETS RELATED EQUIPM ADDITIONS OR REPLACEMENTS OF THE SAME. WARRANTIES ISSUED WITH RESPECT TO THE F CARBON CERTIFICATES OR CREDITS (REFERR ENERGY PRODUCTION INCENTIVES (PERFORM	IENT MONITORING IN ADDITION THE REFERENCED COI ED TO AMONG OT ANCE-BASED INC	EQUIPMENT SECURITY IN LLATERAL ANY HER THINGS A ENTIVES) AND	SMART METERS AI TEREST INCLUDES / RENEWABLE ENE AS SRECS) ANY RE	ND ALL RGY OR NEWABLE
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATE covers timber to be	cut covers as-ext	racted collateral 🗾 is filed as	a fixture filing
Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	SET ON THE SO SAID WASHOUG SOUTH 54 37'43' INCH REBAR WI' COR LS 22330"; OF 72.94 FEET T CAP STAMPED "	INUM CAP STA UTHERLY RIGI FAL RIVER ROA 'EAST A DISTA TH A 2" ALUMII THENCE SOUT O A 5/8 INCH F PROP COR LS	MPED "PROP COR HT OF WAY BOUND AD; THENCE CONTIL ANCE OF 49.52 FEE NUM CAP STAMPED TH 25 41'15" EAST A REBAR WITH A 2" AI 22330"; THENCE S(ARY OF NUING T TO A 5/8 D "PROP DISTANCE LUMINUM OUTH 41
17. MISCELLANEOUS:				

NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if lin cause Individual Debtor name did not fit, check here	ne 1b was left blank]		
9a. ORGANIZATION'S NAME				
R 9b. INDIVIDUAL'S SURNAME				
THALHOFER FIRST PERSONAL NAME				
COLIN ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE	SPACE IS FOR FILING OFFICE	CE USE ONLY
 DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Dedo not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing 		e 1b or 2b of the Financ	cing Statement (Form UCC1) (use ex	act, full name;
10a. ORGANIZATION'S NAME	A /			
10b. INDIVIDUAL'S SURNAME	6		~	
INDIVIDUAL'S FIRST PERSONAL NAME	XX			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			- 4	SUFFIX
c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	4	ADDITIONAL NAME(S)/INITIAL(S)) SUFFIX
: MAILING ADDRESS	CITY	77	STATE POSTAL CODE	COUNTRY
ADDITIONAL SPACE FOR ITEM 4 (Collateral): BENEFITS RELATED TO INCENTIVES TO SUPPORMAY RECEIVE OR BE ENTITLED TO AS A RESULT BECURITY AGREEMENT DOES NOT CREATE A S BE RECORDED IN THE LAND RECORDS.	T OF THE PHOTO	VOLTAIC SO	LAR ENERGY EQUIP	MENT. THI
3. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATE		extracted collateral 🗾 is filed a	s a fixture filing
. 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 REBAR WITH A 2 22330" ON THE V OF THE NORTHV THENCE NORTH	ELLANDINUM WEST LINE OF WEST QUART I 00 01'22" WI 57.97 FEET T	I CAP STAMPED "PR F THE NORTHEAST IER OF SAID SECTIC EST ALONG SAID WE O THE POINT OF BE	QUARTER ON 14; EST LINE A
. MISCELLANEOUS:				