UCC FINANCING STATEMENT				
FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294				
B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
2826 83610				
CSC 801 Adlai Stevenson Drive				
Springfield, IL 62703	Filed In: Texas (Harris)			
SEE BELOW FOR SECURED PARTY CONTACT INFO	IHE	E ABOVE SPACE IS FO		
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact not fit in line 1b, leave all of item 1 blank, check here	ct, full name; do not omit, modify, or abbreviate provide the Individual Debtor information in item			ual Debtor's name will
1a. ORGANIZATION'S NAME				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUF		SUFFIX
SWEENEY 1c. MAILING ADDRESS 16010 WINCHMORE HILL DR	JILL	STATE	POSTAL CODE	COUNTRY
10010 WINGHINGKE THEE BIX	SPRING	TX	77379	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact not fit in line 2b, leave all of item 2 blank, check here	ct, full name; do not omit, modify, or abbreviate provide the Individual Debtor information in item			al Debtor's name will
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
SWEENEY	PATRICK	OTATE		
2c. MAILING ADDRESS 16010 WINCHMORE HILL DR	SPRING	TX	77379	USA
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR [3a. ORGANIZATION'S NAME Microf]	SECURED PARTY): Provide only one Secure	ed Party name (3a or 3b)		
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS P.O. Box 70085	Albany	STATE GA	POSTAL CODE 31707	COUNTRY
4. COLLATERAL: This financing statement covers the following collateral: All of the Debtor's right, title and interest, now ex		in and to all of th	o Equipment cu	hight to that
certain Lease No. 702738 between Debtor as Lo	essee and Microf,LLC as Le	ssor,(ii) all insura	ince, warranty, re	ental and
other claims and rights to payment and chattel prelating to the foregoing, and (iv) any other prop				
of Lessee's interest in the Equipment. For the pr	urposes of this financing stat	tement, "Équipmo	ent" shall be furth	ner
described in item 12 of the UCC1Ad attached he parts and attachments, improvements and acce				
INFORMATIONAL PURPOSES ONLY. THE PALESSEE HAS NO RIGHT TO SELL OR PLEDG				
LESSEE.	E THE EQUIPIVIENT, IT 13	OVINED DI LES	OON AND LEAD	יבט וט

Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)

Consignee/Consignor

A Debtor is a Transmitting Utility

Seller/Buyer

being administered by a Decedent's Personal Representative

Non-UCC Filing

Licensee/Licensor

2826 83610

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

Agricultural Lien

Bailee/Bailor

Manufactured-Home Transaction

Lessee/Lessor

5. Check <u>only</u> if applicable and check <u>only</u> one box:

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

7. ALTERNATIVE DESIGNATION (if applicable):

8. OPTIONAL FILER REFERENCE DATA:

Public-Finance Transaction

17. MISCELLANEOUS: RTO-000702738

JCC FINANCING STATEMENT ADDEN	DUM				
OLLOW INSTRUCTIONS I. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State	ement; if line 1b was left blank				
ecause Individual Debtor name did not fit, check here [9a. ORGANIZATION'S NAME]					
ca. Sittis with the first of th					
R 9b. INDIVIDUAL'S SURNAME					
SWEENEY					
FIRST PERSONAL NAME					
JILL					
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX				
		E ABOVE SPACE IS FO			
DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor do not omit, modify, or abbreviate any part of the Debtor's name) and enti-		f the Financing Statement (Fo	orm UCC1) (use exact,	full name;	
10a. ORGANIZATION'S NAME					
10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME		7			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX	
. MAILING ADDRESS	CITY	STATE POS	TAL CODE	COUNTRY	
	ASSIGNOR SECURED PARTY'S NAME:	Provide only one name (11a	or 11b)		
11a. ORGANIZATION'S NAME					
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL N	AME(S)/INITIAL(S)	SUFFIX	
MAILING ADDRESS	CITY	STATE POS	TAL CODE	COUNTRY	
ADDITIONAL SPACE FOR ITEM 4 (Collateral): 024 ENTER MAKE A/C SYSTEM - A/C, EVA	P COIL OR FAN COIL, AUX HE	AT AND TSTAT	5 TONS		
,	,				
This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT:				
REAL ESTATE RECORDS (if applicable)		covers as-extracted collatera	al 🔽 is filed as a f	ixture filing	
Name and address of a RECORD OWNER of real estate described in iten (if Debtor does not have a record interest):	16. Description of real estate:			-	
6010 WINCHMORE HILL DR		LOT 32, BLOCK 3, CHAMPION FOREST SEC 8 SUBDIVISION, CENSUS TRACT 554002, BLOCK 1009, HARRIS COUNTY, TX.			
PRING, TX 77379	CENSUS TRACT 55400	2, BLOCK 1009,	HARRIS COU	NIY, IX.	
	APN: 114-854-003-0032				

RP-2024-169264
Pages 3
05/09/2024 12:29 PM
e-Filed & e-Recorded in the
Official Public Records of
HARRIS COUNTY
TENESHIA HUDSPETH
COUNTY CLERK
Fees \$29.00

RECORDERS MEMORANDUM
This instrument was received and recorded electronically and any blackouts, additions or changes were present at the time the instrument was filed and recorded.

Any provision herein which restricts the sale, rental, or use of the described real property because of color or race is invalid and unenforceable under federal law.

THE STATE OF TEXAS
COUNTY OF HARRIS
I hereby certify that this instrument was FILED in File Number Sequence on the date and at the time stamped hereon by me; and was duly RECORDED in the Official Public Records of Real Property of Harris County, Texas.

OF HARRY COUNTY, IT

Linishin Hudgelth COUNTY CLERK HARRIS COUNTY, TEXAS