

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address)
CONSTANTIN CIPRIAN GHITA C/ La Peña 12 OTO ES 22370

Date of Filing : 10/28/2020
Time of Filing : 08:00:00 PM
File Number : 2020-302-7190-4
Lapse Date : NONE

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		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	GHITA		CONSTANTIN	CIPRIAN	
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
C/ La Peña 12		OTO		22370	ES

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
	FREEMAN		CIPIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
C/ La Peña 12		OTO		22370	ES

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					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	Freeman		Cipix:		
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
In care of C/ La Peña 12 - non domestic		Oto		[22370]	ES

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

This financing statement files as a fixture filing, DEBTOR is a Transmitting Utility. The Statement of Assets includes the following: All of the DEBTOR's assets, land and personal property, and all DEBTOR's right, title, and interest in said assets, land and personal property, now owned and hereafter acquired, now existing and hereafter arising, and where ever located, described fully in Security Agreement CCG711013-SA and Indemnity Bonds CCG711013-SA-IB. Adjustment of this filing is in accord with UCC Section 1-103 and 1-101 and House Joint Resolution 192 of June 5, 1933 as in Public Law: Chap

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:

<input type="checkbox"/> Public-Finance Transaction	<input type="checkbox"/> Manufactured-Home Transaction	<input checked="" type="checkbox"/> A Debtor is a Transmitting Utility
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6b. Check only if applicable and check only one box:

<input type="checkbox"/> Agricultural Lien	<input type="checkbox"/> Non-UCC Filing
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7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:
File where deeds of trust/real property are recorded. Index as deed of trust & financing statement covering fixtures

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	
GHITA	
FIRST PERSONAL NAME	
CONSTANTIN	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
CIPRIAN,	

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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	
Ghita	Constantin-	Ciprian:		
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
In care of C/ La Peña 12 - non domestic	Oto		[22370]	ES

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:

17. MISCELLANEOUS:

File this in the county records where deeds of trust and real property are recorded.

UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

18. 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

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18a. ORGANIZATION'S NAME	
OR	
18b. INDIVIDUAL'S SURNAME	
GHITA	
FIRST PERSONAL NAME	
CONSTANTIN	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
CIPRIAN,	

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19. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (19a or 19b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

19a. ORGANIZATION'S NAME				
CIPRIAN GHITA				
OR				
19b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
19c. MAILING ADDRESS				
in care of C/ La Peña 12		CITY	STATE	POSTAL CODE
		OTO		22370
				COUNTRY
				ES

20. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (20a or 20b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

20a. ORGANIZATION'S NAME				
OR				
20b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
20c. MAILING ADDRESS				
		CITY	STATE	POSTAL CODE
				COUNTRY

21. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21a or 21b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

21a. ORGANIZATION'S NAME				
OR				
21b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
21c. MAILING ADDRESS				
		CITY	STATE	POSTAL CODE
				COUNTRY

22. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (22a or 22b)

22a. ORGANIZATION'S NAME				
OR				
22b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
22c. MAILING ADDRESS				
		CITY	STATE	POSTAL CODE
				COUNTRY

23. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (23a or 23b)

23a. ORGANIZATION'S NAME				
OR				
23b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
23c. MAILING ADDRESS				
		CITY	STATE	POSTAL CODE
				COUNTRY

24. MISCELLANEOUS:

4. This FINANCING STATEMENT covers the following collateral:

48,48 Stat. 112; Secured party accepts DEBTOR's signature in accord with UCC Section 1-201(39),2-401. NON-NEGOTIABLE-PRIVATE BETWEEN THE PARTIES, EXEMPT FROM LEVY. Without prejudice UCC 1-207 and 1-308 AND or as adopted by other jurisdictions.

ADDITIONAL COLLATERAL DESCRIPTION (not all inclusive):

- a. Income from every source
- b. Proceeds of Secured Parties labor from every source
- c. Application for State of BIHOR CERTIFICATION OF BIRTH, and all other Certificates of Birth, Certificates of Living Birth, Notifications of Registration of Birth, or Certificates of Registration of Birth, or otherwise entitled documents of birth -- whether County, Province, Federal, or other -- either ascribed to or derived from the name of the DEBTOR identified above, or based upon the above described birth document.
- d. Application for Social Security #
- e. Application for ROMANIAN Passport #
- f. Application for ROMANIAN CNP #
- g. Application for ROMANIAN ID #
- h. Application for KINGDOM OF SPAIN Driver License #
- i. Application for KINGDOM OF SPAIN Alien Identification #
- j. Application for Marriage Certificate # N/A
- k. All other property belonging to the DEBTOR including but not limited to all fiduciary accounts in the Debtors name or derivatives there of controlled by government and/or government agencies: other property belonging to the DEBTOR including but not limited to all fiduciary accounts in the Debtors name or derivatives there of controlled by government and/or government agencies:
 - (i) All Accounts Public and Private and Other Rights to Payment:
 - (ii) Inventory:
 - (iii) Equipment:
 - (iv) Instruments and Chattel Paper:
 - (v) General

4. This FINANCING STATEMENT covers the following collateral:

Intangibles:

(vi) Documents: All documents of title including but not limited to: bills of lading, dock warrants and receipts and warehouse receipts.

(vii) Farm Products and Supplies:

(viii) Government Payments and Programs:

(ix) Investment Property:

(x) Progeny:

(xi) Biological Material and Information:

(xii) Biological Records:

(xiii) Personal Information: