

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Ms. Cheryl A. Fallon (401) 453-2300	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)  Benjamin M. Scungio, Esq. Brennan, Recupero, Cascione, Scungio & McAllister, LLP 362 Broadway Providence, RI 02909	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

**1. DEBTOR'S EXACT FULL LEGAL NAME** - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Knollwood Building Corporation						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 567 South County Trail, Suite 111			CITY Exeter	STATE RI	POSTAL CODE 02822	COUNTRY USA
1d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION corporation	1f. JURISDICTION OF ORGANIZATION Rhode Island	1g. ORGANIZATIONAL ID #, if any 72773		<input type="checkbox"/> NONE

**2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME** - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any		<input type="checkbox"/> NONE

**3. SECURED PARTY'S NAME** (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME Randolph Savings Bank						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 732 Centre of New England Blvd., Attn: Commercial Lending			CITY Coventry	STATE RI	POSTAL CODE 02816	COUNTRY USA

**4. This FINANCING STATEMENT covers the following collateral:**

All of the following now or hereafter located at, used at, or arising out of or otherwise in respect of property commonly known as Plat 82, Subdivision Lot #3, Preservation Drive, Exeter, Rhode Island (the "Premises"), and all proceeds and products thereof: (a) all accounts, leases, subleases, tenancies and other agreements, together with all renewals or extensions thereof, and all substitutions therefor, (b) all rents and other payments or accounts due as the result of any use, possession or occupancy of any portion of the Premises, and/or as the result of any services or amenities provided at the Premises, (c) all supporting obligations and collateral for any of the foregoing, (d) all inventory, equipment, fixtures, oil, gas and other mineral rights, and water rights, (e) all plans and specifications, drawings, reports, studies, licenses, permits, approvals and contracts, and (f) all books and records relating to any of the foregoing.

To be filed with the Secretary of State for the State of Rhode Island

5. ALTERNATIVE DESIGNATION (if applicable):		LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional)		ADDITIONAL FEE		All Debtors Debtor 1 Debtor 2		
8. OPTIONAL FILER REFERENCE DATA							