) 				
	C FINANCING STA DW INSTRUCTIONS (front :		тА				
	ME & PHONE OF CONTAC L BECTON 1-800-691-		al)	7			
	ND ACKNOWLEDGMENT		ress)	1			
l	LONDON LEASING						
	P.O. BOX 29625						
	RALEIGH, NC 2762	6-0625					
	<u></u>			THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY			
1. DEE			ly one debtor name (1a or 1b)	- do not abbreviate or combine names			
1a. ORGANIZATION'S NAME OR ROSSI AUTO CARE SALES AND SERVICE							
	1b. INDIVIDUAL'S LAST NAME			FIRST NAME	MIDDLE	IAME	SUFFIX
10 144	1c. MAILING ADDRESS				<u> </u>	1	
	OQUE AVE			CITY WEST WARWICK	STATE RI	POSTAL CODE 2893	COUNTRY
1d. TAX	(ID#: SSN OR EIN	ADD'L INFO RE	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION		NIZATIONAL ID#, if an	
		ORGANIZATION DEBTOR	CORPORATION	RI			✓ none
2. ADE	DITIONAL DEBTOR'S EXAC	T FULL LEGAL NA		me (2a or 2b) - do not abbreviate or com	bine names		
	2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME			FIRST NAME	MIDDLE NAME SUFFIX		
							001117
2c. MAILING ADDRESS				CITY	STATE	POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION				21. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any		
		ORGANIZATION					_
3 CEC	LIBED DARTVE MAME (DEBTOR	CONTENT - F A COLONION OFF	<u> </u>			none
J. JEC	38. ORGANIZATION'S NAME		SSIGNEE OF ASSIGNOR S/P)	insert only one secured party name (3a	or 3b)		
	LONDON LEASING						
OR	R 36. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME		SUFFIX	
3c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY	
P.O. I	BOX 29625			RALEIGH	NC	27626-0625	USA
DESC	FINANCING STATEMENT CRIPTION OF THE CO 'S, REPLACEMENTS,	DLLATERAL: RT		RTL CQOA10 LIFTS AND ALL REFORE.	ADDITIO	NS, ATTACHME	NTS,
5. ALTE	RNATIVE DESIGNATION [If ap	pp\$cable]: ☑LESSI	EE/LESSOR □CONSIGNEE/	CONSIGNOR BAILEE/BAILOR	SELLER/BU	MER.	
		☐AG. L	IEN NON-UCC FIL	ING			
_	his FINANCING STATEMENT I STATE RECORDS, Altach Adi		(or recorded) in the REAL [if applicable]	7. Check to REQUEST SEARCH REPORT(S [optional] [ADDITIONAL FEE]			
ESTATE RECORDS. Attach Addendum [if applicable] [optional] [ADDITIONAL FEE] Debtor 1 Debtor 8. OPTIONAL FILER REFERENCE DATA							
	ETH ROSSI						
FILING	OFFICE COPY — NATION	AL UCC FINANCING	STATEMENT (FORM UCC1)	(REV. 07/29/98)			