

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [Optional] Angela LaSalle 248-593-3958	
B. SEND ACKNOWLEDGMENT TO: [Name and Address] Technology Investment Partners, L.L.C. 40950 Woodward Avenue Suite 201 Bloomfield Hills, MI 48304	

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 ConnectEdu, Inc.				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 20 Park Place, Suite 930		CITY Boston	STATE MA	POSTAL CODE 02116
1d. TAX ID #: SSN OR EIN NOT REQUIRED IN RHODE ISLAND		1e. TYPE OF ORGANIZATION Corporation	1f. JURISDICTION OF ORGANIZATION RI	
		1g. ORGANIZATIONAL ID #, if any 124359		<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				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY
2d. TAX ID #: SSN OR EIN NOT REQUIRED IN RHODE ISLAND		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 Technology Investment Partners, L.L.C.				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 40950 Woodward Avenue, Suite 201		CITY Bloomfield Hills	STATE MI	POSTAL CODE 48304
				COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

All of the equipment and all modifications, additions, replacements and substitutions and proceeds thereto, in whole or in part, on Lease Agreement #070104-VFS000 dated February 21, 2007, between ConnectEdu, Inc., as lessee, and Technology Investment Partners, L.L.C., as lessor, together with all rental payments and other amounts payable under the lease including all proceeds and insurance proceeds.

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. TO REQUEST A SEARCH REPORT, FILE A UCC11

8. OPTIONAL FILER REFERENCE DATA:

ConnectEdu #070104-VFS000