						÷						
UCC FINANCING S FOLLOW INSTRUCTION		•	Y ·									
A. NAME & PHONE OF CONTA Phone: (800) 3		ional) Ex: (818) 662-41	41									
B. SEND ACKNOWLEDGEMEN	T TO: (Name and	Address) 884	14 DIRECT	CAPITAL								
UCC Direct Se P.O. Box 2907		1	049253	35								
Glendale, CA 9	91209-9071	R	IIRI									
-			'		THE AR	00/5 00405	•					
1. DEBTOR'S EXACT FULL	LEGAL NAME -	insert only one_deb	tor name (1a	or 1b) - do not a			S FOR FIL	ING OF	FICE USE ONL	<u>Y</u>		
1a. ORGANIZATION'S NAM Andera Inc		·	******									
1b. INDIVIDUAL'S LAST NA	1b. INDIVIDUAL'S LAST NAME			FIRST NAME			MIDDLE NAME			SUFFI	ix	
1c. MAILING ADDRESS 204 Westminster St				ciry Providence			STATE RI			COUN	COUNTRY	
	ADD'L INFO RE 16. TYPE OF ORGANIZATION ORGANIZATION CORPORATION			1f. JURISDICTION OF ORGANIZATION RI			1g. ORGANIZATIONAL ID #, if any 113014			<u> l</u>	NONE	
2. ADDITIONAL DEBTOR'S		GAL NAME - insert	only o <u>ne</u> de	btor name (2a oi	2b) - do not abbr	eviate or com	nbine nan	nes				
2a. ORGANIZATION'S NAM	ΙE											
2b. INDIVIDUAL'S LAST NAME			FIRST NAME			MIDDLE NAME			SUFFI	ix		
2c. MAILING ADDRESS				CITY		;	STATE	POSTA	L CODE	COUN	ITRY	
	ADD'L INFO RE ORGANIZATION	2e. TYPE OF ORGANI	ZATION	2f. JURISDICTIO	N OF ORGANIZATI	ON	2g. ORGA	NIZATIO	NAL ID#, if an	у г	<del></del>	
3. SECURED PARTY'S NAM	DEBTOR E (or NAME of 1	 TOTAL ASSIGNEE o	f ASSIGNOR	S/P) - insert on	vione secured r	arty name (3	a or 3h)			L	NONE	
3a. ORGANIZATION'S NAM Direct Capital Corp	É	12.			, - <u></u>	, <u>, , , , , , , , , , , , , , , , , , </u>	<u> </u>				****	
OR 3b. INDIVIDUAL'S LAST NAME				FIRST NAME			MIDDLE NAME			SUFFI	SUFFIX	
3c. MAILING ADDRESS 155 Commerce Way					CITY Portsmouth			POSTAL CODE COU		COUN	ITRY	
4. This FINANCING STATEMENT				Portsillouti			NH	0360	l 			
All Debtor/Lessee's Equip Acquired. "All Debtor/Le or Hereafter Acquired. Tr under the lease constitute construed to contradict su transaction not constitutin Lessee under the Lease to	ment, Machin essee's Equipr ne Secured Pa es a "true lease ch intention a g a 'true lease	ery, and other Fixment, Machinery, arty named above et of the property of agreement. If, it shall be deem	and other F (the "Lesso with is the s however, t ed that this	ixed Assets, V or") and the De subject of the I he transaction financing stat	Vhether Located btor named ab- Lease. The executed under the Least ement has bee	d On The P ove (the "Le ecution and se is deeme	remises essee") filing of	Or Ela intend this fir	sewhere, W and agree t nancing stat a financing	hether Nov hat the tra tement sha	w Owne insactior all not be her	
					•				•			
				<i>:</i>								
				·	• •							
5. ALTERNATIVE DESIGNATION	- : '	LESSEE/LESSOR	<b></b>	EE/CONSIGNOR	BAILEE/BAILC	··	LER/BUY	L	AG. LIEN	NON-UC	C FILING	
6. This FINANCING STATEN ESTATE RECORDS. At	tach Addendum ·	[ror record] (or recorded	in the REAL If applicable		QUEST SEARCH F AL FEE)	REPORT(S) on Loption	. ,	/	All Debtors	Debtor 1	Debtor 2	
8. OPTIONAL FILER REFERE 10492535	INCE DATA	217	707	•	A	Andera Inc	•					

## NATIONAL OFFICE FURNITURE

36 BRANCH AVE.-PROVIDENCE, RI 02904 PHONE (401) 274-9000 FAX (401) 273-5200

272-5893

2/15/2007

BILL TO: DIRECT CAPITAL

155 COMMERCE WAY

PORTSMOUTH, NH 03801

SHIP TO: ANDERA, INC.

204 WESTMINISTER STREET

PROVIDENCE, RI 02903

ATT: JENNIFER JENSEN - 621-7900 x18

(jjensen@andera.com)

FROM: WAYNE ROBINSON

INVOICE M7919									
ITEM	MODEL	DESCRIPTION	QTY	UNIT	AMOUNT				
	-	USED HAWORTH							
		WORKSTATIONS							
		WITH NEW FABRIC							
Α	HAW6072	WORKSTATION WITH ELECTRIC	8	1,450.00	11,600.0				
, ,		EACH CONSISTING OF:			-				
		1 - CORNER WORKSURFACE			-				
		2 - SIDE WORKSURFACES	•		-				
		2 - DRAWER SETS			-				
		1 - FLIPPER CABINET			-				
		1 - OPEN SHELF			-				
		1 - TASK LIGHT			-				
		1 - KEYBOARD TRAY			-				
		1 - TACKBOARD - 36"		PRODUCT	11,600.0				
			SET UF	% DELIVERY	1,200.0				
				TOTAL	12,800.0				
		DIDECALE #020/6800100							

RI RESALE #02046800100