UCC Direct Services 10783289 P.O. Box 29071 Glendale, CA 91209-9071 RIRI  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR THE ONLY  THE ABOVE SP	UCC Direct Services 10783289 P.O. Box 29071 Glendale, CA 91209-9071 RIRI  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  SEETOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1s or 1b) - do not abbreviate or combine names  1s. ORGANIZATION'S NAME   TRIST NAME   MIDDLE NAME   SUFFIX		·	ıx: (818) 662-4141					
P.O. Box 29071 Glendale, CA 91209-9071 RIRI  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILI	P. C. Box 29071 Glendale, CA 91209-9071 RIRI  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OFFICE ONLY	SEND ACKNOWLEDGEME	NT TO: (Name and	Address) 9707 CITIZEN	NS LEASIN				
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  SETATE POSTAL CODE COUNTRY  AND INFORME  ANDIANDAL DESTORS EXACT FULL LEGAL NAME - insert only one_ debtor name (1a or 1b) - do not abbreviate or combine names  1s. DRAWIZATIONS NAME  HINCKley, Allen & Snyder LLP  1s. INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  AND FREE Center  RI  POSTAL CODE COUNTRY Providence RI  POSTAL CODE COUNTRY RI  RI  RI  RI  RI  RI  RI  RI  RI  R	Glendale, CA 91209-9071    THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY   THE			107832	89				
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The Company of the Control of the	Table   Tree		TO ALL SIANAP					ILING OFFICE USE ONLY	<u> </u>
ID. INDIVIDUAL'S LAST NAME    FIRST NAME	TID. INDIVIDUAL'S LAST NAME    FIRST NAME	1a. ORGANIZATION'S NA	ME	insert only one_debtor name (1a	or 1b) - do not	abbreviate or combine name	\$ 		
Providence   Providence   RI   02903   USA	Providence   Providence   RI   02903   USA				FIRST NAME		MIDDLE	NAME	SUFFIX
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26. INDIVIDUAL'S LAST NAME    FIRST NAME   MIDDLE NAME   SUFFIX	26. INDIVIDUAL'S LAST NAME    FIRST NAME   MIDDLE NAME   SUFFIX	SEE INSTRUCTIONS	ORGANIZATION		1f. JURISDICTI		1g. ORG	BANIZATIONAL ID #, if any	
2b. INDIVIDUAL'S LAST NAME    FIRST NAME   FIRST NAME   MIDDLE NAME   SUFFIX	2b. INDIVIDUAL'S LAST NAME    FIRST NAME   MIDDLE NAME   SUFFIX			EGAL NAME - insert only one_d	ebtor name (2a	or 2b) - do not abbreviate or o	combine na	imes	
ANLING ADDRESS  CITY  STATE POSTAL CODE  COUNTRY  SEE INSTRUCTIONS  ADD'L INFO RE ORGANIZATION DEBTOR  COUNTRY  STATE POSTAL CODE  COUNTRY  STATE POSTAL CODE  COUNTRY  NON  ECURED 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  RBS Asset Finance, Inc.  3b. INDIVIDUAL'S LAST NAME  FIRST NAME  MIDDLE NAME  STATE POSTAL CODE COUNTRY  RI POSTAL CODE COUNTRY USA  CITY PROVIDENCE  Equipment described in the above-referenced financing statement includes but is not limited to the Equipment described on Schedule A attached eto and made a part hereof; which specific Equipment describin is made a part of the original financing statement amended hereby. This financing enter to overs all replacements, repairs, substitutions, additions, accessions and accessories thereto, any deposit accounts or security deposits releated, and related software, embedded therein or otherwise, and to the extent not listed above as original collateral, proceeds and products of the	ANLING ADDRESS  CITY  STATE POSTAL CODE  COUNTRY  SEE INSTRUCTIONS  ADD'L INFO RE ORGANIZATION DEBTOR  COUNTRY  STATE POSTAL CODE  COUNTRY  STATE POSTAL CODE  COUNTRY  NON  ECURED 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  RBS Asset Finance, Inc.  3b. INDIVIDUAL'S LAST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  STATE POSTAL CODE COUNTRY USA  CITY PROVIDENCE  CITY PROVIDENCE  STATE POSTAL CODE O2903  USA  COUNTRY USA  Equipment described in the above-referenced financing statement includes but is not limited to the Equipment described on Schedule A attached eto and made a part hereof; which specific Equipment describtion is made a part of the original financing statement amended hereby. This financing enement covers all replacements, repairs, substitutions, additions, accessions and accessories thereto, any deposit accounts or security deposits related, and related software, embedded therein or otherwise, and to the extent not listed above as original collateral, proceeds and products of the	, 28. ORGANIZATION S NA	MME						
ADD'L INFO RE ORGANIZATION DEBTOR  ECURED 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 RBS Asset Finance, Inc.  3b. INDIVIDUAL'S LAST NAME  INCLING ADDRESS  O CANAL ST., 1ST FLOOR  Equipment described in the above-referenced financing statement includes but is not limited to the Equipment described on Schedule A attached ato and made a part hereof; which specific Equipment description is made a part of the original financing statement amended hereby. This financing entered ento, and related software, embedded therein or otherwise, and to the extent not listed above as original collateral, proceeds and products of the extent not listed above as original collateral, proceeds and products of the	ADD'L INFO RE ORGANIZATION DEBTOR  ECURED 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 RBS Asset Finance, Inc.  3b. INDIVIDUAL'S LAST NAME CITY PROVIDENCE  CITY PROVIDENCE  Equipment described in the above-referenced financing statement includes but is not limited to the Equipment described on Schedule A attached ato and made a part hereof; which specific Equipment description is made a part of the original financing statement amended hereby. This financing entered ento, and related software, embedded therein or otherwise, and to the extent not listed above as original collateral, proceeds and products of the	2b. INDIVIDUAL'S LAST I	IAME		FIRST NAME		MIDDLE	NAME	SUFFIX
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3a. ORGANIZATION'S NAME RBS Asset Finance, Inc.  3b. INDIVIDUAL'S LAST NAME  MIDDLE NAME  SUFFIX  CITY PROVIDENCE  STATE RI  O2903  COUNTRY USA  COUNTRY USA  Equipment described in the above-referenced financing statement includes but is not limited to the Equipment described on Schedule A attached eto and made a part hereof; which specific Equipment description is made a part of the original financing statement amended hereby. This financing tement covers all replacements, repairs, substitutions, additions, accessions and accessories thereto, any deposit accounts or security deposits reference, and related software, embedded therein or otherwise, and to the extent not listed above as original collateral, proceeds and products of the	3a. ORGANIZATION'S NAME RBS Asset Finance, Inc.  3b. INDIVIDUAL'S LAST NAME  MIDDLE NAME  SUFFIX  CITY PROVIDENCE  STATE RI  O2903  COUNTRY USA  COUNTRY USA  DESCRIPTION OF THE POSTAL CODE RI  O2903  COUNTRY USA  COUNTRY USA  COUNTRY USA  COUNTRY USA  COUNTRY PROVIDENCE  STATE RI  O2903  COUNTRY USA  CO	SEE INSTRUCTIONS	ORGANIZATION	2e. TYPE OF ORGANIZATION	2f. JURISDICTI	ON OF ORGANIZATION			
RBS Asset Finance, Inc.  3b. INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  CITY PROVIDENCE  STATE RI  02903  COUNTRY USA  COU	RBS Asset Finance, Inc.  3b. INDIVIDUAL'S LAST NAME  MIDDLE NAME  SUFFIX  CITY PROVIDENCE  RI  Described on Schedule A attached the placements are pairs, substitutions, additions, accessions and accessories thereto, any deposit accounts or security deposits related, and related software, embedded therein or otherwise, and to the extent not listed above as original collateral, proceeds and products of the		<u> </u>	TOTAL ASSIGNEE of ASSIGNO	R S/P) - insert o	nly o <u>ne</u> secured party name	e (3a or 3b)		
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PROVIDENCE  RI 02903  USA  DESCRIPTION OF THE PROVIDENCE OF THE PR	PROVIDENCE RI 02903 USA  DESCRIPTION OF THE PROVIDENCE OF THE PROV	3b. INDIVIDUAL'S LAST N	IAME		FIRST NAME		MIDDLE	NAME	SUFFIX
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		eto and made a part tement covers all rep	hereof; which s lacements, rep ware, embedde	pecific Equipment description airs, substitutions, additions, ad therein or otherwise, and t	on is made a p accessions a to the extent n	art of the original financir nd accessories thereto, a ot listed above as origina	ng statem any depos il collatera	ent amended hereb sit accounts or secu al, proceeds and pro	y. This financing rity deposits rela oducts of the



## SCHEDULE A EQUIPMENT

	3S Asset Finance, Inc. d/b/a TIZENS ASSET FINANCE	DEBTOR:	Hinckley, Allen & Snyder I	<u>LP</u>	
This Schedule A of Equipmer	nt is attached to and made a part of:	Note No.	17	and all related docum	ents.
Qu <u>Year Make N</u>	Equipment Description    Solution	Serial Number	<u>Equip</u> <u>Street</u>	ment Location City State	<u>Zip</u>
	Equipment as described on invoice # 328951, 330790, 328953, 328952, & 328950		1500 Fleet Center	Providence RI	02903
Above equipment distributed	by: WB Mason				
	Equipment as described on invoice #26042		1500 Fleet Center	Providence RI	02903
Above equipment distributed	by: Graham Builders, Inc.				
	Equipment as described on invoice # R62282760, R61445224, R62468520	H91J1C1 B91J1C1 911194B00192AA215522	1500 Fleet Center 28 State Street		02903 02109
Above equipment distributed	by: Dell				
	Equipment as described on invoice # 2		28 State Street	Boston MA	02109
RBS Asset Finance, Inc. d/b/a CITIZENS ASSET FINANCE By: Name:		DEBTOR: By: Name:	Hinckley, Allen & Snyder L	LP	
Title:		Title:			