UCC FINANCING STATEMENT AMENDMI FOLLOW INSTRUCTIONS (front and back) CAREFULLY	ENT					
A. NAME & PHONE OF CONTACT AT FILER [Optional]		l				
Michelle MacKnight - 521-7000						
B. SEND ACKNOWLEDGMENT TO: [Name and Address]						
Edward G. Avila, Esquire Roberts, Carroll, Feldstein & Peirce						
10 Weybosset Street						
Providence, RI 02903						
	1					
		THE ABOVE SPACE I	S FOR F	ILING OFFICE USE	ONLY	
1a. INITIAL FINANCING STATEMENT FILE#				FINANCING STATEMENT e filed (for record) (or record		
200502275540 dated 4/29/05 at 2:39 p.m.				ATE RECORDS.	ady in the riexe	
2. TERMINATION: Effectiveness of the Financing Statement identified above is te	rminated with res	pect to security interest(s) if the Secured	Party authori	zing this Termination Statem	nent.	
CONTINUATION: Effectiveness of the Financing Statement identified above will continued for the additional period provided by applicable law.	th respect to seco	urity interest(s) of the Secured Party author	orizing this C	ontinuation Statement is		
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and addr	ess of assignee in	item 7c; and also give name of assignor	in item 9.			
5. AMENDMENT (PARTY INFORMATION): This amendment affects Debtor		Party of record. Check only one of thes				
Also check one of the following three boxes and provide appropriate information in items	6 and/or 7.	•		D name: Complete item in 7:	e at 7h and also	
CHANGE name and/or address: Give current record name in item 6a or 6b; also givename (if name change) in item 7a or 7b and/or new address (if address change) in		DELETE name: Give record name to be deleted in item 6a or 6b.		7c; also complete items 7d		
6. CURRENT RECORD INFORMATION:						
6a. ORGANIZATION'S NAME						
KCP Acquisition, LLC 65. INDIVIDUAL'S LAST NAME	FIRST NAM	F	MIDDLE NAME		SUFFIX	
60. INDIVIDUALS CAST NAME					ļ <u></u>	
7. CHANGED (NEW) OR ADDED INFORMATION:						
7a. ORGANIZATION'S NAME						
OR	EIRST NAM	FIRST NAME		MIDDLE NAME SU		
7b. INDIVIDUAL'S LAST NAME	TINOTIVA	Thomas was				
7c. MAILING ADDRESS		CITY		POSTAL CODE	COUNTRY	
7d. TAX ID #: SSN OR EIN ADDIL INFO RE ORGANIZATION ORGANIZATION DEBTOR	71. JURISDI	71. JURISDICTION OF ORGANIZATION		7g. ORGANIZATIONAL ID #, if any		
8. AMENDMENT (COLLATERAL CHANGE): check only one box.						
Describe collateral deleted or added, or give entire restated coll	ateral description	or describe collateral assigned.				
Subordination - The Secured Party hereby subo	rdinates t	he above-refrenced fina	ancina	statement and s	security	
interests therein to the financing statement and	security in	nterests of Webster Bar	nk, Nati	onal Associatio	n	
pursuant to the terms of the Intercreditor and St	ubordinat	ion Agreement betwee	en Smal	.1 Business Lo	an Fund	
Corporation and Webster Bank, National Assoc	iation date	ed March 27, 2007.				
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor,	IENDMENT (n check here 🔲 a	ame of assignor, if this an Assignment). I nd enter name of DEBTOR authorizing th	f this is an Ai is Amendmer	mendment authorized by a C nt.	Debtor which adds	
ga, ORGANIZATION'S NAME						
The Small Business Loan Fund Corporation						
96. INDIVIDUAL'S LAST NAME	FIRST NAM	ΛE	MIDDLE	NAME	SUFFIX	
	1		<u> </u>		1	
10. OPTIONAL FILER REFERENCE DATA						

Our File No. 2629-90