uc	C FINANC	ING STATE	MENT						
		,	back) CAREFULLY	· · · · · · · · · · · · · · · · · · ·					
		CONTACT AT FILER (OF Rhodes, Esq.	401-885-9393	1					
B. S	END ACKNOWLEDG	MENT TO: [Name a	nd Address]						
	 Harrington	n & Rhodes, L	td.						
		th County Trai		ŀ					
	East Gree	eriwich, Ki uzo	010						
	1			ı					
	<u> </u>				THE ABOVE SPAC	E IS FOR	FILING OFFICE US	E ONLY	
1. DI	BTOR'S EXACT F		- insert only one debtor name (1a or	1b) - do not abbrevia	te or combine names				
OR	IQBAL IRREVOCABLE TRUST OF 2007			1				·	
	15. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE	NAME	SUFFIX	
10. MAILING ADDRESS 4519 POST ROAD				CITY WARWICK		STATE RI	POSTAL CODE 02818	COUNTRY	
1d. TA	1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION			11. JURISDICTION OF ORGANIZATION		1g. ORGANIZATIONAL ID #, if any		USA	
RI	NOT REQUIRED IN ORGANIZATION DEBTOR TRUST				RI		☐ NON		
2. AE	28. ORGANIZATION'S		EGAL NAME: - insert only one de	ebtor name (2a or 2b)	- do not abbreviate or combine	names	· · · · · · · · · · · · · · · · · · ·		
OR	1			T					
	2b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE	NAME	SUFFIX	
2c. MAILING ADDRESS 4519 POST ROAD				WARWICK		STATE	POSTAL CODE 02818	COUNTRY	
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION				2f. JURISDICTION OF ORGANIZATION			ANIZATIONAL ID #, if any	USA	
R	OT REQUIRED IN HODE ISLAND	ORGANIZATION DEBTOR	CORP.	RI		1531	29	П иои	
3. SI	3a. ORGANIZATION'S		TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one sec	cured party name (3a or 3b)				
QB	COASTWAY CREDIT UNION			EIDOT NAME		MIDDLE NAME			
	3b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDULE NAME		SUFFIX	
3c. MAILING ADDRESS 25 LOVELL AVENUE				CRANSTON		STATE	POSTAL CODE	COUNTRY	
25 LOVELL AVENUE CRANSTON RI 02910 USA 4. This FINANCING STATEMENT covers the following collateral:								USA	
At W Bi	ND EQUIPME ITH ALL REF ELONGING T	ENT, FURNITU PLACEMENTS HERETO O F	ALL EQUIPMENT AN JRE AND FIXTURES THEREOF, ALL AT OR USE IN CONNEC	NOW OWN TACHMENT CTION THE	NED OR HEREAF S, ACCESSORIE REWITH. (B) ALL	TER ACC S, PART . PASSE!	QUIRED, TOGI 'S AND TOOLS NGER AND	ETHER S	
			IICLES REGISTERE ACQUIRED, TOGE					IS, NOW	
Α	TTACHMENT	S, ACCESSO	RIES, PARTS, EQUI	PMENT AN	D TOOLS BELON	IGING TH	HERETO OR F		
			TH. (C) ALL INVENT R HEREINAFTER AC						
0	UTSTANDING	G OR HEREAI	FTER ARISING. (E)A						
			FTER ACQUIRED.						
			e]: LESSEE/LESSOR CONS	SIGNEE/CONSIGNO	OR □BAILEE/BAILOR □ SELLER/BUYER □ AGILIEN □ NON-UCC FILING 7. TO REQUEST A SEARCH REPORT. FILE A UCC11				
		Attach Addendum [if a			7. TO TIEGOEST A SI	EAUGIT DEF	OTH, TIEC A GOOT		
8. OI	PTIONAL FILER R	EFERENCE DATA:							