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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

SCHMIDT EQUIPMENT INC.
 PO BOX 578
 NORTH OXFORD MA 01537

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
 S J Beaugregard Construction

OR

1b. INDIVIDUAL'S LAST NAME

FIRST NAME	MIDDLE NAME	SUFFIX

1c. MAILING ADDRESS
 PO Box 244

CITY	STATE	POSTAL CODE	COUNTRY
Lincoln	RI	02865	US

1d. TAX ID # SSN OR EIN NOT REQUIRED IN RHODE ISLAND

1e. TYPE OF ORGANIZATION
 Corporation

1f. JURISDICTION OF ORGANIZATION
 RHODE ISLAND

1g. ORGANIZATIONAL ID #, if any 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

OR

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 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
 SCHMIDT EQUIPMENT INC.

OR

3b. INDIVIDUAL'S LAST NAME

FIRST NAME	MIDDLE NAME	SUFFIX

3c. MAILING ADDRESS
 P O BOX 578

CITY	STATE	POSTAL CODE	COUNTRY
NORTH OXFORD	MA	01537	US

4. This FINANCING STATEMENT covers the following collateral:
 Rental of One (1) Hitachi 75U Excavator
 Serial #FF01CGQ044729

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 7. TO REQUEST A SEARCH REPORT, FILE A UCC 11 (if applicable)

8. OPTIONAL FILER REFERENCE DATA