



**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] CSC Diligenz, Inc. 1-800-858-5294	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)  27659379 CSC Diligenz, Inc. 6500 Harbour Heights Pkwy, Suite 400 Mukilteo, WA 98275	
Filed In: Rhode Island (S.O.S.)	

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 <b>EAST COMMERCE SOLUTIONS, INC.</b>				
OR	1b. INDIVIDUAL'S LAST NAME			
	FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS <b>22 MORRIS LANE</b>				
	CITY <b>EAST PROVIDENCE</b>	STATE <b>RI</b>	POSTAL CODE <b>02914</b>	COUNTRY <b>USA</b>
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION <b>Corp.</b>	1f. JURISDICTION OF ORGANIZATION <b>RI</b>	1g. ORGANIZATIONAL ID #, if any <b>98978</b> <input type="checkbox"/> 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. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> 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 <b>AEL Financial, LLC</b>				
OR	3b. INDIVIDUAL'S LAST NAME			
	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS <b>600 N. Buffalo Grove Road</b>				
	CITY <b>Buffalo Grove</b>	STATE <b>IL</b>	POSTAL CODE <b>60089</b>	COUNTRY <b>USA</b>

4. This FINANCING STATEMENT covers the following collateral:  
 ALL PROPERTY, GOODS, INVENTORY AND EQUIPMENT, EITHER SUBJECT OF EXSISTING AND FUTURE LEASING AGREEMENTS (AND RENTAL AND USAGE AGREEMENTS) BETWEEN DEBTOR AS LESSEE AND SECURED PARTY AS LESSOR, OR ACQUIRED THROUGH CASH ADVANCES OR CREDIT OTHERWISE PROVIDED BY SECURED PARTY ("LEASED GOODS") WHICH LEASED GOODS SHALL INCLUDE, WITHOUT LIMITATION: TOOLS, APPLIANCES, RESTURANT, TURF MAINTENANCE, IRRIGATION EQUIPMENT, VIDEO, CONSTRUCTION, INDUSTRIAL, MANUFACTURING, MEDICAL, PARTY, OFFICE EQUIPMENT, MACHINERY, COMPUTERS AND SOFTWARE; ALL SUBSTITUTIONS AND REPLACEMENTS FOR, AND ACCESSIONS, ATTACHMENTS, AND OTHER ADDITIONS TO LEASED GOODS; ALL PRODUCTS AND PROCEEDS THEREOF (INCLUDING INSURANCE PROCEEDS).

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 [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional]		All Debtors	Debtor 1	Debtor 2	