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proceeds s, assets, personal accounts, electronic credit ent past goodwill,	
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C FILING	

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	C FINANCING		=							
	AME & PHONE OF CONT	ACT AT FILER [option								
B. SI	END ACKNOWLEDGEME	NT TO: (Name and	Address) 7995 WEBST	ER BANK						
	CT Lien Solu	tions	274509	89	-					
	P.O. Box 290		RIRI							
	Glendale, CA	91209-9071	TAITA							
	<u> </u>				THE ABOVE SE	PACE IS FOR FI	LING OFFICE USE ONLY			
			insert only one debtor name (1	a or 1b) - do not						
	1a. ORGANIZATION'S N One Stop Advant									
R	1b. INDIVIDUAL'S LAST	NAME		FIRST NAME		MIDDLE	MIDDLE NAME		ξ	
	MIDWAY PLACE S	SUTIE 23		CRANSTO	CRANSTON		POSTAL CODE 02920	COUNT		
1d. <u>Ş</u>	EE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION CORPORATION	1f. JURISDICTION OF ORGANIZATION		1 -	1g. ORGANIZATIONAL ID #, if any 000161964		NONE	
			EGAL NAME - insert only one d	ebtor name (2a	or 2b) - do not abbreviate	or combine r	names			
	2a. ORGANIZATION'S N	AME								
R	2b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	MIDDLE NAME		<		
c. M	MAILING ADDRESS	_		CITY		STATE	POSTAL CODE	COUNT	ΓRY	
	SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION	2e. TYPE OF ORGANIZATION	2f. JURISDICTI	ON OF ORGANIZATION	2g. ORG	GANIZATIONAL ID #, if any	<u>,</u>		
3. S			TOTAL ASSIGNEE of ASSIGN	OR S/P) - insert	only <u>one</u> secured party n	ame (3a or 3t	p)			
	3a. ORGANIZATION'S N Webster Bank, I									
R	3b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE	MIDDLE NAME		SUFFIX	
20 MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY				
		145		New Britain		СТ	06053	USA	4	
4. Th	IS FINANCING STATEME	NT covers the follow	ring collateral:	1	-	4				
3c. MAILING ADDRESS CITY			s of the Debto going description hereafter actation, all furnitialisms and all conent property, es, including, vs. tradenames, computer protor, and all recions and scher tangible or tor, and all recions and scher tangible or the SECUI	r(s), whether now own on, this financing stat quired or arising, and ure, fixtures, equipme ther insurance claims deposit accounts, righ without limitation, all ta copyrights, copyrights, copyrights, copyrights of the pebtor operates intangible) of others; corded data of any kin atics. NOTICE TO LLATERAL (INCLUDIT	state CT  and or herea ement cover all proceeds and proceeds refund cla applications ware, engine or (c) others d or nature, ALL SECUIO OLATE THE	fter acquired or arising all of the followings and products there erials, inventory, other erials, inventory, other erials, inventory, other erials, inventory, other erials, incense fees, pass, rights to sue and reering drawings, cust ering the passess, use or har regardless of the merchant eright of the merchant eright erials, eright eright eright eright eright eright eright eright erials eright e	ng and a propertion of: A er goodstel paper t, letter-catents, pecover from er list the Deb vive authoredium of N CREDIO OUNTS.	Il estoritoritoric CD		
	ntinued on addendu									
5. AL 6. T	LTERNATIVE DESIGNAT	· · · · · L	LESSEE/LESSOR CONSI	GNEE/CONSIGNO	R BAILEE/BAILOR REQUEST SEARCH REPORT	SELLER/B RT(\$) on Debtor	/s\	NON-UC		
	ESTATE RECORDS.  OPTIONAL FILER REF	Attach Addendum	lif applica		NAL FEEI	[optional]	Alt Debtors	Debtor 1	Debto	
	IENDOO		475028170	1	161					

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9a. ORGANIZATION'S NAME	k) CAREFULLY ON RELATED FINANCING STATE	MENT				
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
MISCELLANEOUS						
450989-RI-0						
95 WEBSTER BANK						
e with: Rhode Island 161					R FILING OFFICE USE	ONLY
ADDITIONAL DEBTOR'S EXACT FU	LL LEGAL NAME - insert only one	name (11a or 11b) - do not abbre	eviate or combine	nailles		
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	N	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS		CITY	s	STATE	POSTAL CODE	COUNTRY
d. <u>SEE INSTRUCTION</u> ADD'L INFO F ORGANIZATIO		11f. JURISDICTION OF ORGANIZ	ATION 1	I1g. OR	GANIZATIONAL ID#, if	any
ADDITIONAL SECURED PART	Y'S or ASSIGNOR S/P's I	NAME - insert only <u>one</u> name (12	a or 12b)			
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	Ţ,	MIDDLE	NAME	SUFFIX
2c. MAILING ADDRESS		СІТУ	,	STATE	POSTAL CODE	COUNTRY
3. This FINANCING STATEMENT covers collateral or is filed as a fixture filing 4. Description of real estate:	timber to be cut or as-extracted	16. Additional collateral description of the collateral descriptio	OF THE BUS	SINES THE S TH TH	SS OF THE DEE SECURED PAR HE DEBTOR(S).	BTOR(S)WILI TY UNDER
15. Name and address of a RECORD OWNER (if Debtor does not have a record interes		17. Check only if applicable and Debtor is a Trust or Tru	stee acting with resp		operty held in trust	or Decedent's E