LICC FINANCIN	G STATEMENT AMENDMEN	IT		
FOLLOW INSTRUCTION	NS (front and back) CAREFULLY	· ·		
Corporation Service	CONTACT AT FILER [optional] ce Company 1-800-858-5294 GMENT TO: (Name and Address)			
57417177 - 3	37430			
801 Adlai S	n Service Company Stevenson Drive , IL 62703-4261			
L	Filed In: Rhode Island	<u> </u>	SDACE IS FOR FILING OFFICE	· Her on V
1a. INITIAL FINANCING STA		THE ABOVE	SPACE IS FOR FILING OFFICE  1b. This FINANCING STATE to be filed [for record] (or	MENT AMENDMENT is
#002674 10/1/20	001  Iffectiveness of the Financing Statement identified above in	is terminated with respect to security interact/s\ of	REAL ESTATE RECORD	DS.
3. CONTINUATION:	Effectiveness of the Financing Statement identified about the control of the Financing Statement identified about the control of the Financing Statement identified about the control of the Financing Statement identified about 10 cm.			
	I or partial): Give name of assignee in item 7a or 7b and	address of assignee in item 7c; and also give name	e of assignor in item 9.	
		ebtor or Secured Party of record. Check on		
CHANGE name and/or	owing three boxes <u>and</u> provide appropriate information in i raddress: Please refer to the detailed instructions	DELETE name: Give record name	ADD name: Complete item 7a or 7b, and also item 7c;	
6. CURRENT RECORD II		to be deleted in item 6a or 6b.	also complete items 7e-7g (if	applicable).
6a. ORGANIZATION'S	NAME FRANK A TONER ELECTRIC	COMPANY, INC.		
OR 66. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR	ADDED INFORMATION:			
7a. ORGANIZATION'S	NAME			
75. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS		CITY	STATE POSTAL CODE	COUNTRY
7d. SEE INSTRUCTIONS	ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if	fany
	ORGANIZATION DEBTOR			NONE
· —	ATERAL CHANGE): check only one box. leieted or added, or give entire restated collater	ral description, or, describe collateral.	ned.	
		ar description, or describe condictor and assign	ica,	
	PARTY OF RECORD AUTHORIZING THIS AM			
	e authorizing Debtor, or if this is a Termination authorized NAME RBS Citizens, N.A. successor	L _ L		t
0.0				
96, INDIVIDUAL'S LAS	T NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10,OPTIONAL FILER REFER	RENCE DATA 001-8016178-0101 550	0000		F= 4.4= 4.00
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