ATTN: LO	TIONS (front and CONTACT AT FILER (OF MENT TO: [Name a HODE ISLAND DAN SERVICIN	back) CAREFULLY otional] nd Addressj					
PO BOX PROVIDE	9488 ENCE, RI 0294	0-9488		THE ADOVE CRAC	5 10 500 1		
1. DEBTOR'S EXACT	FULL LEGAL NAME	- insert only one debtor name (1a or	1b) - do not abbreviat	THE ABOVE SPAC	E IS FUR I	TILING OFFICE US	EUNLY
1a ORGANIZATION'S	ONCEPTS, IN	C					
90	OR 1b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE NAME	
tc. MAILING ADDRESS	1c. MAILING ADDRESS			CITY		POSTAL CODE	COUNTRY
560 MINERAL		; 	PAWTUC		RI	02860	USA
1d. TAX ID #: SSN OR EIN NOT REQUIRED IN RHODE ISLAND	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION CORPORATION	1f. JURISDICTION OF ORGANIZATION		1g. ORGANIZATIONAL ID #, if any		[77]
2. ADDITIONAL DEBTO	DR'S EXACT FULL L	EGAL NAME: - insert only one de		- de not abbreviate or combine r			L NON
2a. ORGANIZATION'S	S NAME						
QR 2b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE NAME		SUFFIX
2c MAILING ADDRESS			CITY		STATE .	Tagaru agar	
COMPLETE ADDITION			CITY		STATE	POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN NOT REQUIRED IN BHODE ISLAND	ADD'L INFO RE ORGANIZATION DEBTOR	28. TYPE OF ORGANIZATION	2f. JURISDICTION	OF ORGANIZATION	2g. ORGA	NIZATIONAL ID #, if any	NON
3. SECURED PARTY'S	NAME: (or NAME of T	OTAL ASSIGNEE of ASSIGNOR S/P	- insert only one sec	ired party name (3a or 3b)			
BANK RHO	DE ISLAND						
OR 3b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE NAME		SUFFIX
3c. MAILING ADDRESS			CITY				
PO BOX 9488				NCE	STATE	POSTAL CODE 02940	COUNTRY
FILED TO PER FINANCING \$1	O RHODE ISLA FECT A SECU FATEMENT BE	AND GENERAL LAW JRITY INTEREST IN EARING BK No. 2007 LLY FILED ON MARI	/S S6A-9-40 THE COLL/ 704722770,	2(2)(c), THIS FINA ATERAL DESCRIE BETWEEN FORE	ANCING BED IN 1	STATEMENT	
E ALTERNATUE DECI	CNATION						
5. ALTERNATIVE DESI		IGNEE/CONSIGNOR	BAILEE/BAILOR SELLER/BUYER AGLIEN NON-UCC FILING 7. TO REQUEST A SEARCH REPORT, FILE A UCC11				
ESTATE RECORDS.	EMENT is to be filed [for a Attach Addendum [if ap		7. TO REQUEST A SEA	AHCH REPO	OHT, FILE A UCC11		
8. OPTIONAL FILER RI	FERENCE DATA:	Y OF STATE					

FILING OFFICE COPY— RHODE ISLAND UCC FINANCING STATEMENT (FORM UCC1) (REV. 05/01/06)