ROBERT P. LANG, ESQ. ROTHENBERG, HYETT, EISEN & LANG, P.A.  3439 ATLANTIC AVENUE  ATLANTIC CITY, NJ 08401  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SP	modify, or abbreviate or information in item  L NAME  modify, or abbreviate or information in item	ADDI	btor's name); if any part of a Statement Addendum (For TIONAL NAME (SYNITIAL)  FORTAL CODE  02809  btor's name); if any part of a Statement Addendum (For	s) SUFFIX  COUNTRY  USA the Individual Debtor's m UCC1Ad)
ROTHENBERG, HYETT, EISEN & LANG, P.A.  3430 ATLANTIC CITY, NJ 08401  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING OF THE INCIDIOUS O	modify, or abbreviate or information in item  L NAME  modify, or abbreviate or information in item	ADDI	btor's name); if any part of a Statement Addendum (For TIONAL NAME (SYNITIAL)  FORTAL CODE  02809  btor's name); if any part of a Statement Addendum (For	s) SUFFIX  COUNTRY  USA the Individual Debtor's m UCC1Ad)
ROTHENBERG, HYETT, EISEN & LANG, P.A. 3430 ATLANTIC AVENUE ATLANTIC CITY, NJ 08401  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  DEBTOR'S NAME: Provide only good Debtor name (1s or 1b) (use exact, lat name, do not onth, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not it in line 1b, beave all of item 1 biant, check here and provide the Individual Debtor information in litem 10 of the Financing Statement Addendum (Form UCC1Ad)  Ta. CRGANIZATION'S NAME  GALILEAN PROPERTIES, LLC  TREADY STATE TO STATE POSTAL CODE TO STATE TO	modify, or abbreviate or information in item  L NAME  modify, or abbreviate or information in item	ADDI	btor's name); if any part of a Statement Addendum (For TIONAL NAME (SYNITIAL)  FORTAL CODE  02809  btor's name); if any part of a Statement Addendum (For	s) SUFFIX  COUNTRY  USA the Individual Debtor's m UCC1Ad)
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DEBTOR'S NAME: Provide only and better name (as or 1b) (use exact, this name, do not omit, modify, or abbreviate any part of the Debtor's name): If any part of the Individual Debtor's name with not it in the 1b, base all of item 1 blank, check here and provide the Individual Debtor Information in item 10 of the Financing Statement Addendum (Form UCC1Ag)  The CRIGANIZATION'S NAME  GALILEAN PROPERTIES, LLC  The INDIVIDUAL'S SURNAME  THE INDIVIDUAL'S SURNAME (SPINITIAL(S))  DEBTOR'S NAME: Provide only grag Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Individual Debtor's name); if any part of the Individual Debtor's name with not it in line 2b, leave all of fem 2 blank, check here and provide the Individual Debtor information in fem 10 of the Financing Statement Addendum (Form UCC1Ad)  The Individual Debtor information in fem 10 of the Financing Statement Addendum (Form UCC1Ad)  The Individual Debtor information in fem 10 of the Financing Statement Addendum (Form UCC1Ad)  The Individual Debtor information in fem 10 of the Financing Statement Addendum (Form UCC1Ad)  The Individual Debtor information in fem 10 of the Financing Statement Addendum (Form UCC1Ad)  The Individual Debtor information in fem 10 of the Financing Statement Addendum (Form UCC1Ad)  The Individual Debtor information in fem 10 of the Financing Statement Addendum (Form UCC1Ad)  The Individual Debtor information in fem 10 of the Financing Statement Addendum (Form UCC1Ad)  The Individual Debtor information in fem 10 of the Financing Statement Addendum (Form UCC1Ad)  The Individual Debtor information in fem 10 of the Financing Statement Addendum (Form UCC1Ad)  The Individual Debtor information in fem 10 of the Financing Statement Addendum (Form UCC1Ad)  The Individual Debtor information in fem 10 of the Financing Statemen	modify, or abbreviate or information in item  L NAME  modify, or abbreviate or information in item	ADDI	btor's name); if any part of a Statement Addendum (For TIONAL NAME (SYNITIAL)  FORTAL CODE  02809  btor's name); if any part of a Statement Addendum (For	s) SUFFIX  COUNTRY  USA the Individual Debtor's m UCC1Ad)
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DEBTOR'S NAME: Provide only gring Debtor name (2e or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fill in line 2b, leave all of flom 2 blank, check here and provide the Individual Debtor Information in flom 10 of the Financing Statement Addendum (Form UCC1Ad)  2a. ORGANIZATION'S NAME  2b. INDIVIDUAL'S SURNAME  COHEN  MAILING ADDRESS  85 OCEAN DRIVE  CAPE MAY  DANIEL  COAPE MAY  STATE POSTAL CODE COUNTRY  USA  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only goal Secured Party name (3a or 3b)  UNITED STATES OF AMERICA acting by and through the Secretary of Commerce, NOAA/NMFS  3b. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  ADDITIONAL NAME(SYINITIAL(S) SUFFIX  UNITED STATES OF AMERICA acting by and through the Secretary of Commerce, NOAA/NMFS  3b. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  ADDITIONAL NAME(SYINITIAL(S) SUFFIX  CITY  STATE POSTAL CODE COUNTRY  MD 20910  USA  COLLATERAL: This financing statement covers the following collateral:  LL OF THE CHATTEL, GOODS, FURNITURE, FIXTURES AND EQUIPMENT AND THE PROCEEDS THEREOF RESENTLY LOCATED AT 16 BROAD COMMON ROAD, BRISTOL, RHODE ISLAND, MORE PARTICULARLY  SECRIBED IN A DEED RECORDED IN THE TOWN OF BRISTOL LAND EVIDENCE RECORDS IN BOOK 1425 AT AGE 345. This filling covers all of the listed items now existing and	modify, or abbreviate or information in item	e any part of the Del	btor's name); if any part of t statement Addendum (For	the Individual Debtor's mr UCC1Ad)
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COHEN  MAILING ADDRESS  SOCEAN DRIVE  CAPE MAY  CAPE MAY  STATE  ORGANIZATIONS NAME  UNITED STATES OF AMERICA acting by and through the Secretary of Commerce, NOAA/NMFS  35. INDIVIDUAL'S SURNAME  MAILING ADDRESS  TIN: MB5, 1315 EAST-WEST HIGHWAY  MAILING ADDRESS  TIN: MB5, 1315 EAST-WEST HIGHWAY  SILVER SPRING  CITY  COUNTRY  STATE  POSTAL CODE  ONAA/NMFS  SUFFIX  SUFFIX  COUNTRY  UNITED STATES OF AMERICA acting by and through the Secretary of Commerce, NOAA/NMFS  SOLICITY  STATE  POSTAL CODE  COUNTRY  SUFFIX  SUFFIX  CITY  STATE  POSTAL CODE  COUNTRY  SUFFIX  SUFFIX  CITY  STATE  POSTAL CODE  COUNTRY  USA  COUNTRY  USA  COLLATERAL: This financing statement covers the following collateral:  LL OF THE CHATTEL, GOODS, FURNITURE, FIXTURES AND EQUIPMENT AND THE PROCEEDS THEREOF  RESENTLY LOCATED AT 16 BROAD COMMON ROAD, BRISTOL, RHODE ISLAND, MORE PARTICULARLY  ESCRIBED IN A DEED RECORDED IN THE TOWN OF BRISTOL LAND EVIDENCE RECORDS IN BOOK 1425 AT  MGE 345. This filing covers all of the listed items now existing and	AY		TIONAL NAME(S)/INITIAL(S	
MAILING ADDRESS  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)  SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)  SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)  SO. ORGANIZATION'S NAME  UNITED STATES OF AMERICA acting by and through the Secretary of Commerce, NOAA/NMFS  3D. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  ADDITIONAL NAME(SYMNITIAL(S) SUFFIX  STATE POSTAL CODE COUNTRY  USA  COLLATERAL: This financing statement covers the following collateral:  LL OF THE CHATTEL, GOODS, FURNITURE, FIXTURES AND EQUIPMENT AND THE PROCEEDS THEREOF RESENTLY LOCATED AT 16 BROAD COMMON ROAD, BRISTOL, RHODE ISLAND, MORE PARTICULARLY ESCRIBED IN A DEED RECORDED IN THE TOWN OF BRISTOL LAND EVIDENCE RECORDS IN BOOK 1425 AT AGE 345. This filing covers all of the listed items now existing and	AY		TIONAL NAME(S)/INITIAL(S	
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MAILING ADDRESS TTN: MB5, 1315 EAST-WEST HIGHWAY SILVER SPRING  COUNTRY USA  COLLATERAL: This financing statement covers the following collateral:  LL OF THE CHATTEL, GOODS, FURNITURE, FIXTURES AND EQUIPMENT AND THE PROCEEDS THEREOF RESENTLY LOCATED AT 16 BROAD COMMON ROAD, BRISTOL, RHODE ISLAND, MORE PARTICULARLY ESCRIBED IN A DEED RECORDED IN THE TOWN OF BRISTOL LAND EVIDENCE RECORDS IN BOOK 1425 AT AGE 345. This filing covers all of the listed items now existing and	ugh the Sec	retary of (	Commerce, NO	AA/NMFS
TTN: MB5, 1315 EAST-WEST HIGHWAY SILVER SPRING  COLLATERAL: This financing statement covers the following collateral:  LL OF THE CHATTEL, GOODS, FURNITURE, FIXTURES AND EQUIPMENT AND THE PROCEEDS THEREOF RESENTLY LOCATED AT 16 BROAD COMMON ROAD, BRISTOL, RHODE ISLAND, MORE PARTICULARLY ESCRIBED IN A DEED RECORDED IN THE TOWN OF BRISTOL LAND EVIDENCE RECORDS IN BOOK 1425 AT AGE 345. This filing covers all of the listed items now existing and				
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## **UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS** 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME GALILEAN PROPERTIES, LLC 96. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not amit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME and the second s TUB. INDIVIDUAL'S SURNAME COHEN INDIVIDUAL'S FIRST PERSONAL NAME DANIEL INDIVIOUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS POSTAL CODE COUNTRY 985 OCEAN DRIVE CAPE MAY NJ 08204 USA ADDITIONAL SECURED PARTY'S NAME of ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11s or 11s) 11a. DRGANIZATION'S NAME OR 116. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. [ ] This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable) 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral Iv is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): 16. Description of real estate: SEE ATTACHED EXHIBIT A 17. MISCELLANEOUS:

FILING OFFICE COPY -- UCC FINANCING STATEMENT ADDENDUM (Form UCC1Ad) (Rev. 04/20/11)