UCC FINANCING STATEMENT				
FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294	4			
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) T04618970 - 387650 Corporation Service Company 801 Adiai Stevenson Drive Springfield, IL 62703 Filed In:	200			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	<u></u>			
104618970 - 387650				
Corporation Service Company	'			
801 Adlai Stevenson Drive Springfield, IL 62703 Filed In:	Phodo Island			
Filed III.	(S.O.S.)			
L DEBICORO	THE ABOVE SI		OR FILING OFFICE USE	
1. DED FOR S NAME: Provide only one Debtor name (1a or 1b) (use exact,	full name; do not omit, modify, or abbreviate any part ide the Individual Debtor information in item 10 of the			
1a. ORGANIZATION'S NAME Prudent Security Incorporated	d			
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITEO	NAL NAME(S)/INITIAL(S)	SUFFIX
				00111%
1c. MAILING ADDRESS 2905 Post Road	CITY Warwick	STATE	POSTAL CODE 02886	COUNTRY
a DEDTODIO VIVIS				
 DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, 1 name will not fit in line 2b, leave all of item 2 blank, check here and provided in the prov	full name; do not omit, modify, or abbreviate any part ide the Individual Debtor information in item 10 of the			
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	Laborio	ALAL ALABATICAMATIALICA	Toursey.
Cucino	Gregory	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
2c. MAILING ADDRESS 390 Hammet Road	CITY	STATE	POSTAL CODE	COUNTRY
OF SUPER RAPPAR WAY	Coventry	RI	02816	USA
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SE 3a. ORGANIZATION'S NAME CORPORATION SERVICE OF	COMPANY. AS REPRESENTATIVE OF SECURED PARTY IN COMPANY.	ame (3a or 3b /E	o)	
on!				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS P.O. Box 2576	CITY	STATE	POSTAL CODE	COUNTRY
UCCSPREP@CSCINFO.COM	Springfield	IL	62708	USA
COLLATERAL: This financing statement covers the following collateral: NOTICE PURSUANT TO AN AGREEMENT BETV	VEEN DERTOR AND SECURED	PARTY	DERTOR HAS A	GREED
NOT TO FURTHER ENCUMBER THE COLLATE				
WHICH MAY CONSTITUTE THE TORTIOUS INT				
ENCUMBRANCER IN THE EVENT THAT ANY EN	NTITY IS GRANTED A SECURIT	Y INTER	REST IN DEBTOR	'S
ACCOUNTS, CHATTEL PAPER OR GENERAL IN	NTANGIBLES CONTRARY TO T	HE ABO	VE, THE SECURE	ED PARTY
ASSERTS A CLAIM TO ANY PROCEEDS THERE	OF RECEIVED BY SUCH ENTIT	Y.		
Accounts accounts receivable contracts real process	norty loopon noton billo coconta	ob	saaaa in aatian al	h = 44 = 1
Accounts, accounts receivable, contracts, real propaper, instruments, documents and other forms of	•			
or leased or for services rendered by Grantor, the	_			
represented thereby, whether or not delivered, good		_	•	
including rights of stoppage in transit and of recover				
			red by a Decedent's Personal	
6a. Check only if applicable and check only one box:			f applicable and check <u>only</u> o	
Public-Finance Transaction Manufactured-Home Transaction 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor Seller/Buyer		tural Lien Non-UCC	Filing see/Licensor
8. OPTIONAL FILER REFERENCE DATA:				
				104618970

UCC FINANCING STATEMENT ADDENDUM

OLLOW INSTRUCTIONS O. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Finance	ing Statement: If line 1h was to	ft blank	1			
because Individual Debtor name did not fit, check here	ang Statement, ir line its was le	IL DIBIN				
9a. ORGANIZATION'S NAME			1			
Prudent Security Incorporated						
R 9b. INDIVIDUAL'S SURNAME						
FIRST PERSONAL NAME						
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX				
DEBTOR'S NAME: Provide (10a or 10b) only one additional do not omit, modify, or abbreviate any part of the Debtor's name)					IS FOR FILING OFFICE Statement (Form UCC1) (use	
10a. ORGANIZATION'S NAME	·					
10b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME				· · · ·		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
INDIVIDUAL O ABBINORAL NAME (O) INTIVIDUAL (O)						SUFFIX
. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
11b. INDIVIDUAL'S SURNAME	FIRST PERS	ONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
ADDITIONAL SPACE FOR ITEM 4 (Collateral):	<u></u>					
ogether with all customer lists, books and and records, whether now in existence or had receivables"); niventory, including without limitation, all go naterials, work in process and finished mencidentals, office supplies, packaging materials.	nereafter created, re cods manufactured rchandise, findings erials and any and a	elating ther or acquire or compor all items us	reto (collective ed for sale or I nent materials sed or consun	ely refe lease, s, and	erred to hereinafte and any piece go all supplies, good	ods, raw
This FINANCING STATEMENT is to be filed [for record] (or re REAL ESTATE RECORDS (if applicable)	cove	NCING STATE	cut covers as-	extracted o	collateral is filed as a	fixture filing
Name and address of a RECORD OWNER of real estate described (if Debtor does not have a record interest):	d in item 16 16. Description	on of real estate				
MISCELLANEOUS:						

UCC FINANCING STATEMENT ADDENDUM

FOL	LOWINSTRUCTIONS						
	AME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement, ecause Individual Debtor name did not fit, check here	if line 1b was le	eft blank	1			
_	9a. ORGANIZATION'S NAME			4			
	Prudent Security Incorporated						
	Tradent Cocanty Incorporated			-			
OR	9b. INDIVIDUAL'S SURNAME						
	90. INDIVIDUALS SURNAME						
	FIRST PERSONAL NAME			1			
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX				
						IS FOR FILING OFFICE	
	DEBTOR'S NAME: Provide (10a or 10b) only <u>one</u> additional Debtor name of do not omit, modify, or abbreviate any part of the Debtor's name) and enter the r			line 1b or 2b of	the Financing \$	Statement (Form UCC1) (us	e exact, full nar
	10a. ORGANIZATION'S NAME						
OR	10b. INDIVIDUAL'S SURNAME						
-	INDIVIDUAL'S FIRST PERSONAL NAME						
					······		
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SÜFFIX
0c.	MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
	ADDITIONAL SECURED PARTY'S NAME or ASSIGN 11a. ORGANIZATION'S NAME	OK SECUE	RED PARTT	S NAME: Prov	vide only <u>one</u> na	ame (11a or 11b)	
ORI	11b. INDIVIDUAL'S SURNAME	FIRST PERS	SONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
1c.	MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
2. A	DDITIONAL SPACE FOR ITEM 4 (Collateral):	1					
bu	siness of Grantor or which may contribute to the fil	nished pr	oduct or to	the sale,	promotion	n and shipment th	ereof, in
wh	ich Grantor now or at any time hereafter may have	e an inter	est, wheth	er or not th	ne same i	s in transit or in th	ie
СО	nstructive, actual or exclusive occupancy or posse	ssion of (Grantor or	is held by	Grantor o	r by others for Gr	antor's
	count (collectively referred to hereinafter as "Inven			_		•	
	ods, including without limitation, all machinery, eq		parts, sup	olies, appa	eratus an	pliances tools fit	tinas
	niture, furnishings, fixtures and articles of tangible						
3. [This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	,	ANCING STATE	 			
-	REAL ESTATE RECORDS (if applicable)	COVE	ers timber to be o	cut Covers	as-extracted of	collateral is filed as a	fixture filing
	ame and address of a RECORD OWNER of real estate described in item 16 Debtor does not have a record interest):	+	ion of real estate				g
	The second secon						

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 Prudent Security Incorporated 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(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 omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a, ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c MAILING ADDRESS STATE POSTAL CODE COUNTRY 11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME 11b. 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): the Grantor or in which Grantor may have or may hereafter acquire any interest, at any location (collectively referred to hereinafter as "Equipment"); General intangibles in which the Grantor now has or hereafter acquires any rights, including but not limited to, causes of action, corporate or business records, inventions, designs, patents, patent applications, trademarks, trademark registrations and applications therefor, goodwill, trade names, trade secrets, trade processes, copyrights, copyright registrations and applications therefor, licenses, permits, franchises, customer lists, computer programs, all claims under 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 is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest):

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 Prudent Security Incorporated 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(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 omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a, ORGANIZATION'S NAME 10b INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) COUNTRY 10c. MAILING ADDRESS STATE POSTAL CODE CITY 11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a, ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY 11c. MAILING ADDRESS CITY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): guaranties, tax refund claims, rights and claims against carriers and shippers, leases, claims under insurance policies, all rights to indemnification and all other intangible personal property and intellectual property of every kind and nature (collectively referred to hereinafter as "Intangibles"); All the capital stock, bonds, notes, partnership interests, member interests in limited liability companies, and other securities, if any, held of record or beneficially by the Grantor, including without limitation the capital stock of all subsidiaries of the Grantor, and the Grantor's interests in all securities brokerage accounts (collectively referred to 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 is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate:

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