UCC FINANCING STATEMENT AMENDN FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-52 B. E-MAIL CONTACT AT FILER (optional) SPRFilling@cscinfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)	294			
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 118444095 - 372200 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 Filed	In: Rhode Island (S.O.S.)	THE ABOVE S	SPACE IS FOR FILING OFFICE I	JSE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 201110651650 12/19/2011		(or recorded) in the R	ATEMENT AMENDMENT is to be filed EAL ESTATE RECORDS	• • • • • • • • • • • • • • • • • • • •
2. TERMINATION: Effectiveness of the Financing Statement identifie	ed above is terminated v		t Addendum (Form UCC3Ad) and provide terest(s) of Secured Party authorizing	
Statement 3. ASSIGNMENT (full or partial): Provide name of Assignee in item				
For partial assignment, complete items 7 and 9 <u>and</u> also indicate aff	fected collateral in item t	3		
 CONTINUATION: Effectiveness of the Financing Statement identical continued for the additional period provided by applicable law 	tified above with respect	to the security interest(s) of	Secured Party authorizing this Conti	nuation Statement is
5. PARTY INFORMATION CHANGE:	neck <u>one</u> of these three bo	oxes to:		
Check <u>one</u> of these two boxes: This Change affects Debtor <u>or</u> Secured Party of record	CHANGE name and/or a item 6a or 6b; and item	iddress: CompleteADD	name: Complete item DELETE na r 7b, <u>and</u> item 7cto be delete	ame: Give record name ed in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information 6a. ORGANIZATION'S NAMEAMARAL AUTOMATION A	on Change - provide only	one name (6a or 6b)		, , , , , , , , , , , , , , , , , , , ,
6b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Ta ORGANIZATION'S NAME	y Information Change - provide o	only <u>one</u> name (7a or 7b) (use exact, f	ull name; do not omit, modify, or abbreviate any	part of the Debtor's name)
72. ORGANIZATION S NAME				
7b. INDIVIDUAL'S SURNAME				·
7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME				74.4
INDIVIDUAL'S FIRST PERSONAL NAME				- Va. 10-
70. INDIVIDUAL'S SURNAME				SUFFIX
INDIVIDUAL'S FIRST PERSONAL NAME	СІТУ		STATE POSTAL CODE	COUNTRY
INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	CITY ADD collateral	DELETE collateral	STATE POSTAL CODE	COUNTRY
INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) C. MAILING ADDRESS D. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: NAME of SECURED PARTY of RECORD AUTHORIZING The lifthis is an Amendment authorized by a DEBTOR, check here and present the second support of the second	ADD collateral	rovide only <u>one</u> name (9a or 9l g Debtor	RESTATE covered collateral	COUNTRY USA ASSIGN collateral
INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) C MAILING ADDRESS C COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collateral	rovide only <u>one</u> name (9a or 9l g Debtor	RESTATE covered collateral	COUNTRY USA ASSIGN collateral
INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) C. MAILING ADDRESS D. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: NAME of SECURED PARTY of RECORD AUTHORIZING The lifthis is an Amendment authorized by a DEBTOR, check here and present the second support of the second	ADD collateral	rovide only <u>one</u> name (9a or 9l g Deblor S Citizens, N.A.	RESTATE covered collateral	COUNTE USA ASSIGN coil