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| | | | | |
| UCC FINANCING STATEMENT | | | | |
| FOLLOW INSTRUCTIONS | | | | |
| A. NAME & PHONE OF CONTACT AT FILER (optional) | | | | |
| Corporation Service Company 1-800-858-5294 B. E-MAIL CONTACT AT FILER (optional) | ······ | | | |
| B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 1232 19831 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: RI 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full | \sim | | | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | | | | |
| 1232 19831 | ~ | | | |
| Corporation Service Company | ¹ | | | |
| 801 Adlai Stevenson Drive | | | | |
| Springfield, IL 62703 Filed In: RI | hode Island | | | |
| L silling | (S.O. <u>S.)</u> | | | |
| 1 DERTOP'S NAME DESIGNATION OF THE PROPERTY OF | THE ABOVE SPA | | R FILING OFFICE USE | |
| | name; do not omit, modify, or abbreviate any part of the Individual Debtor information in item 10 of the Fi | | | |
| 1a. ORGANIZATION'S NAME RAC Group, Inc | | | | |
| | | | | |
| OR 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | | |
| 1c. MAILING ADDRESS 50 Weybosset Street | CITY | STATE | POSTAL CODE | COUNTRY |
| | Providence | RI | 02903 | USA |
| 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name will not fit in line 2b, leave all of item 2 blank, check here and provide | name; do not omit, modify, or abbreviate any part of | the Debtor | s name); if any part of the In- | dividual Debtor's |
| <u> </u> | the individual Debtor information in item 10 of the Fi | nancing Sta | atement Addendum (Form UC | :C1Ad) |
| 2a. ORGANIZATION'S NAME Downcity Food and Cocktails | | | | |
| OR 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | | |
| 2c. MAILING ADDRESS 50 Weybosset Street | СІТУ | STATE | POSTAL CODE | COUNTRY |
| | Providence | RI | 02903 | USA |
| 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU | RED PARTY): Provide only one Secured Party nam | e (3a or 3b | } | |
| 3a. ORGANIZATION'S NAME Mission Valley Bank | | | | |
| OR 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | LADDITION | MAL MAME (CARNITIAL (C) | Teneriy |
| 30. M.S. V. 20. 20. 31. W. III. 2 | THOU PERSONAL NAME | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
| 3c. MAILING ADDRESS 9116 Sunland Boulevard | CITY | STATE | POSTAL CODE | COUNTRY |
| o i i o odinana bodio ara | Sun Valley | CA | 91352 | USA |
| 4. COLLATERAL: This financing statement covers the following collateral: | , | <u>1</u> | | <u> </u> |
| All of Debtor's now existing or hereafter created or a | | | | |
| Accounts; Deposit Accounts; Documents; General In | | | | |
| Money, Securities Accounts; Supporting Obligations; | | | | |
| whom Secured Party is acting as agent, including, w | ithout limitation, all property of ev | very de | scription now or h | ereafter in |
| the possession or custody of or in transit to Secured | | | • | |
| limitation, safekeeping, collection or pledge, for the a | | | , , , | |
| power; other goods and personal property of Debtor, | | | | |
| owned or hereafter acquired, existing, leased or cons | | | | |
| Proceeds of each of the foregoing and all accessions to, substitutions and replacements for and rents, profits and | | | | |
| products of each of the foregoing. Capitalized terms | | _ | | |
| Commercial Code. Debtor's rights to payment with se | | | | |
| Agreements") for payment in respect of amounts dire | ectly or indirectly due to Debtor for | or good | s and services pro | vided |
| | | | ed by a Decedent's Personal | |
| 6a. Check only if applicable and check only one box: | | _ | applicable and check only or | |
| Public-Finance Transaction Manufactured-Home Transaction | A Debtor is a Transmitting Utility | Agricultu | | |
| 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor C 8. OPTIONAL FILER REFERENCE DATA: :Cont #22511 | Consignee/Consignor Seller/Buyer | Bail | ee/Bailor Licens | ee/Licensor |
| V. OF HORAL FILER REFERENCE DATA. (CONT.#22517) | | | 1 | 1232 19831 |

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 RAC Group, Inc. 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 POSTAL CODE COUNTRY ADDITIONAL SECURED PARTY'S NAME of 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 POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): where payment is made by credit, charge, debit or similar cards shall be deemed to be Accounts of Debtor for all purposes hereunder. Notice to Prospective Creditors: The Debtor has agreed with Secured Party not to transfer or further encumber the Collateral described herein and to incur no further debt or obligations until the Obligations due under Debtor's agreement with Secured Party are satisfied and paid in full. Any party who takes an interest in the Collateral or causes Debtor 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 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); 17. MISCELLANEOUS:

UCC FINANCING STATEMENT ADDENDUM

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 RAC Group, Inc. OR 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 OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): violate its agreements with Secured Party is interfering with Secured Party's contractual agreement with Debtor to Secured Party's detriment and will be subject to legal action. 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 (if Debtor does not have a record interest): Description of real estate:

17. MISCELLANEOUS: