UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141					
B. E-MAIL CONTACT AT FILER (optional)					
CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 34785 - BROO	OKLINE				
CT Lien Solutions 57803	134				
P.O. Box 29071 Glendale, CA 91209-9071					
	, 1				
File with: Secretary of State, RI	<b>┛</b> ┃	THE ABOVE SPA	CE IS F	OR FILING OFFICE USE	ONLY
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of item 1 blank, check here and provide the					
1a. ORGANIZATION'S NAME Wonderland Smoke Shop Inc					
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		I ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
				v e /v iiie(o)	Sur III
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
666 East Avenue	Warwick		RI	02886	USA
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 the 2a. ORGANIZATION'S NAME.				rs name); if any part of the In stement Addendum (Form UC	
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		LADDITION	VAL NAME(S)/INITIAL(S)	SUFFIX
ED. HOWED GUILLOUIL	TROT FERSONAL NAME		ADDITION	VAL NAME(S)NITTAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECUR	ED PARTY): Provide only	one Secured Party nam	ne (3a or 3t	) )	
3a. ORGANIZATION'S NAME BANK RHODE ISLAND		•			
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	<u> </u>	STATE	POSTAL CODE	COUNTRY
One Turks Head Place 4. COLLATERAL: This financing statement covers the following collateral:	Providence		RI	02903	USA
All inventory, equipment, accounts (including but not limited to all her to all promissory notes), letter-of-credit rights, letters of credit, documperformance, and general intangibles (including but not limited to all extraction; all oil, gas, other minerals and accounts constituting as-exaccessories, fittings, increases, tools, parts, repairs, supplies, and co of and substitutions for all or any part of the foregoing property; all in foregoing property; all records and data and embedded software relacreate, maintain and process any such records and data on electron now existing or hereafter arising, whether now owned or hereafter ac and all products and proceeds (including but not limited to all insurar	nents, deposit accou software and all pay ktracted collateral; all ommingled goods rel surance refunds rela sting to the foregoing ic media; and all sup equired or whether no	nts, investment pro ment intangibles); a I fixtures; all timber ating to the foregoin ting to the foregoin property, and all e porting obligations ow or hereafter sub	perty, mo all oil, gat to be cu ng prope g proper quipmen relating t ject to ar	oney, other rights to pa s and other minerals be t; all attachments, acce rty, and all additions, re ty; all good will relating t, inventory and softwa to the foregoing proper ny rights in the foregoin	yment and efore essions, eplacements to the re to utilize, ty; all whether
Check <u>only</u> if applicable and check <u>only</u> one box: Collateral isheld in a Trust (s	ee UCC1Ad, item 17 and	I Instructions)being	administer	ed by a Decedent's Persona	al Representative
6a. Check <u>only</u> if applicable and check <u>only</u> one box:		6b. C	heck <u>only</u>	if applicable and check only	<del>- 1</del>
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility  7. ALTERNATIVE DESIGNATION (if explicable): The expect appears to the property of the expectation of the public plant of the public p			Agricultural Lien Non-UCC Filing		
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Col  8. OPTIONAL FILER REFERENCE DATA:	nsignee/Consignor	Seller/Buyer	[] Baile	ee/Bailor Licens	ee/Licensor
57803134 Small Business BRI 391 - 3901			311	1	

RI SOS Filing Number: 201717692650 Date: 3/2/2017 10:55:00 AM