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UCC FINANCING STATEMENT AMENDM FOLLOW INSTRUCTIONS	ENT				
A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141	···	1			
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluw	er com				
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l ————————————————————————————————————	8211405				
P.O. Box 29071	IRI				
Gioridate, 674 51255 5671	IIXI]			
File with: Secretary of State, RI		THE ABOVE SPA	CE IS FO	OR FILING OFFICE U	SE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 201211103210 4/19/2012 SS RI		(or recorded) in the REA	L ESTATE	ENDMENT is to be filed [RECORDS m UCC3Ad) and provide Deb	*
TERMINATION: Effectiveness of the Financing Statement identifier Statement	d above is terminated with				
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a For partial assignment, complete items 7 and 9 and also indicate a			ssignor in	item 9	
CONTINUATION: Effectiveness of the Financing Statement identification continued for the additional period provided by applicable law	ed above with respect to	he security interest(s) of Secured	l Party auti	norizing this Continuation	Statement is
5. PARTY INFORMATION CHANGE:				_	· <u> </u>
Check <u>one</u> of these two boxes: This Change affects Debtor or Secured Party of record	heck <u>one</u> of these three box — CHANGE name and/or a item 6a or 6b; and item 7	ddress: Complete ADD nar	ne: Comple		: Give record name
6. CURRENT RECORD INFORMATION: Complete for Party Information of	=		and item 7	c to be deleted in	illem da or ob
6a. ORGANIZATION'S NAME HICHAR & LUCA, INC.					
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONA	LNAME	ADDITIO	NAL NAME(SYINITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Info	rmation Change provide only	and the second full age of the second full age of			
7a. ORGANIZATION'S NAME	vinadori change - provide only g	name (7a or 7b) (USE exact, Tuli hame	OU HOR OFFICE	nodiny, or aboreviate any part or t	ne Debtor's name)
OR 75. INDIVIDUAL'S SURNAME		<u></u>			==
	·				
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
COLLATERAL CHANGE: <u>Also</u> check <u>one</u> of these four boxes: Indicate collateral:	Li ADD collateral	DELETE collateral F	RESTATE	covered collateral	ASSIGN collateral
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING TH	HIS AMENDMENT: Pro	vide only <u>one</u> name (9a or 9b) (n	ame of Ass	ignor, if this is an Assignm	ent)
	provide name of authorizin				
THE WASHINGTON TRUST COMPANY					
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSONA	LNAME	ADDITION	IAL NAME(S)/INITIAL(S)	SUFFIX
I O. OPTIONAL FILER REFERENCE DATA: Debtor Name: HICHAR	& LUCA, INC.	.			

RI SOS Filing Number: 201717804170 Date: 3/29/2017 1:41:00 PM

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11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 201211103210 4/19/2012 SS RI 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME THE WASHINGTON TRUST COMPANY OR 12b. INDIVIDUAL'S SURNAME

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

13a. ORGANIZATION'S NAME

HICHAR & LUCA, INC.

OR

13b. INDIVIDUAL'S SURNAME

ADDITIONAL NAME(SYINITIAL(S)

SUFFIX

SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

Debtor Name and Address:

HICHAR & LUCA, INC. - 222 SOUTH MAIN STREET, PROVIDENCE, RI 02903

Secured Party Name and Address:

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

THE WASHINGTON TRUST COMPANY - 23 BROAD STREET, WESTERLY, RI 02891

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

15. This FINANCING STATEMENT AMENDMENT:	17. Description of real estate:
covers timber to be cut covers as-extracted collateral is filed as a fixture filing	
16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):	

18. MISCELLANEOUS: 58211405-RI-0 32814 - THE WASHINGTON TRUST

THE WASHINGTON TRUST COMPANY File with: Secretary of State, RI

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