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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) 7995 - WEBSTER BANK					
CT Lien Solutions 58271	120				
P.O. Box 29071 Glendale, CA 91209-9071	·				
	1				
File with: Secretary of State, RI		THE ABOVE S	SPACE IS FO	OR FILING OFFICE	USE ONLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full r					
name will not fit in line 1b, leave all of item 1 blank, check here and provide the 1a. ORGANIZATION'S NAME	ne Individual Debtoi	information in item 10 of the	e Financing Sta	itement Addendum (Fon	m UCC1Ad)
KEVIN P. HAGERTY, D.M.D., PROFESSIONAL CORP	ORATION				
OR 15. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	· • • • • • • • • • • • • • • • • • • •	STATE	POSTAL CODE	COUNTRY
61 CEDAR AVE #5	EAST GREENWICH		RI	02818	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 control of the c		nodify, or abbreviate any par information in item 10 of the			
2a. ORGANIZATION'S NAME					
OR 2b. INDIVIDUAL'S SURNAME	[-:				SUFFIX
26. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITION	ADDITIONAL NAME(S)/INITIAL(S)	
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECUR	RED PARTY): Provi	de only <u>one</u> Secured Party	name (3a or 3t	<u> </u>	
3a. ORGANIZATION'S NAME Webster Bank, N.A.		·			
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
436 Slater Road, NB 145 4 COLLATERAL: This financing statement covers the following collateral:	New Britain		СТ	06053	USA
4. COLLATERAL: This financing statement covers the following collateral: This Financing Statement covers and is intended to cover all assets proceeds and products thereof. Without limiting the generality of the foregoing description, this fit Debtor(s), wherever located, whether now owned or hereafter acqui	nancing statem	ent covers all of the fol	llowing prop	erties, assets, and	_
All personal and fixture property of every kind and nature including goods, accounts, contract rights, rights to the payment of money, ins	ng, without limit	ation, all fumiture, fixtu	ures, equipn	nent, raw materials	, inventory, other tort claims
chattel paper, electronic chattel paper, documents, instuments, secu of credit, letter-of-credit rights, supporting obligations of every nature	urities and othe	r investment property,	deposit acc	ounts, rights to pro	ceeds of letters
fees, patents, patent applications, trademarks and service marks,tra	demark applica	ations, tradenames, co	pyrights, co	pyright applications	s, rights to sue
and recover for past infringement of patents, trademarks, service macustomer lists, goodwill, and all licenses, permits, agreement of ever	y kind and natu	re pursuant to which (a) the Debte	or operates or has	authority to
operate: (b) the Debtor possesses, uses or has authority to possess or have authority to possess or use property (whether tangible or int	or use propert	y (whether tangible or	intangible)	of others; or (c) oth	ers possess, use
medium of recording, including, without limitation, all software, writing				any kina or natare, r	egaldiess of the
NOTICE TO ALL SECURED PARTIES, LIEN CREDITORS OR OTH ANY SECURITY INTEREST, SALE OR TRANSFER OF COLLATER			TO ACCOL	JNTS, CHATTEL F	PAPER OR
	see UCC1Ad, item		_	ed by a Decedent's Per	
6a. Check only if applicable and check only one box:	□ 4 N-14 /		_	f applicable and check	
Public-Finance Transaction Manufactured-Home Transaction 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Co	Donsignee/Consigno	Transmitting Utility	Agricult		JCC Filing censee/Licensor
8. OPTIONAL FILER REFERENCE DATA:		construction			55.10001210011301
58271120 7995			475	50637598	

RI SOS Filing Number: 201717827250 Date: 4/3/2017 12:31:00 PM

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS						
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; because Individual Debtor name did not fit, check here [7]	if line 1b was left	blank				
9a. ORGANIZATION'S NAME						
KEVIN P. HAGERTY, D.M.D., PROFESSIONAL CO	RPORATIO	N				
OD.						
OR 9b. INDIVIDUAL'S SURNAME		·"				
SIRAT DEDONAL WALL						
FIRST PERSONAL NAME						
ADDITIONAL NAME(S)INITIAL(S)		SUFFIX				
		J SOLVIN	THE ABOVE	CDACI	- 10 500 50 100 0550	05 H05 0N Y
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name	or Dobtor nome	that did not 5t in line			E IS FOR FILING OFFIC	
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the			e ib or ∠b or the Fi	nancing S	tatement (Form UCC1) (use	e exact, full name;
10a. ORGANIZATION'S NAME					 "	
OR THE HERMAN CHANNE						
10b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME					····	
INDIVIDUAL S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)						SUFFIX
10c. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME OF ASSIG	NOR SECURE	D PARTY'S NAM	ME: Provide only	one nam	e (11a or 11b)	•
11a. ORGANIZATION'S NAME						
OR 11b. INDIVIDUAL'S SURNAME	L super proces			1		
TID. INDIVIDUAL S SURMAME	FIRST PERS	ONAL NAME		ADDITIO	NAL NAME(SYINITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY		-11	STATE	POSTAL CODE	COUNTRY
						COOM
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	<u></u>	-	*		<u> </u>	
INSTRUMENTS) WITHOUT THE AUTHORIZATION OF THE SE	CURED PAR	TY WILL VIOLA	TE THE RIGH	TS OF	THE SECURED PART	TY UNDER
THE SECURITY AGREEMENT WITH THE DEBTOR (S). ALSO ORDINARY COURSE OF THE BUSINESS OF THE DEBTOR(S	ANY PAYME WILL ALSO '	NT FROM A DE VIOLATE THE I	POSIT ACCO	UNT OF	THE DEBTOR NOT LIRED PARTY LINDE	IN THE R THE
SECURITY AGREEMENT WITH THE DEBTOR(S).	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			0_0	OKED I AITT ONDE	1 1116
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in	the 14. This FIN	ANCING STATEM	- NT·			
REAL ESTATE RECORDS (if applicable)		rs timber to be cut	covers as-e	extracted o	collateral is filed as a	fixture filing
15. Name and address of a RECORD OWNER of real estate described in item 1		on of real estate:		- AL GOLOG (Solidicidi	- Interest in the
(if Debtor does not have a record interest):						
17. MISCELLANEOUS: 58271120-RI-0 7995 - WEBSTER BANK Wel	oster Bank, N.A.	File	with: Secretary of St	ate, RI	7995 4750637598	_