RI SOS Filing Number: 201718078660 Date: 5/24/2017 11:42:00 AM

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS	T				
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294		1	•		
B. E-MAIL CONTACT AT FILER (optional)	· <b>_</b>	1			
SPRFiling@cscinfo.com  C. SEND ACKNOWLEDGMENT TO: (Name and Address)  1315 27456  Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703  Filed In: Rh	<u>.aa</u>				
1315 27456	,,, <u>,</u>				
Corporation Service Company	ı				
801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Rh	ode Island				
L filingae	(S.O.S.)	THE AROVE S	PACE IS FOR	R FILING OFFICE USE	ONLY
IN THE PROPERTY OF THE PROPERT	·	· · · · · · · · · · · · · · · · · · ·	TEMENT AME	NDMENT is to be filed [fer	
200705548360 10/24/2007		Filer: attach Amendment	Addendum (For	n UCC3Ad) <u>and</u> provide Debto	
2. TERMINATION: Effectiveness of the Financing Statement identified above Statement	e is terminated v	vith respect to the security into	erest(s) of Sec	ured Party authorizing this	renimilation
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7t     For partial assignment, complete items 7 and 9 and also indicate affected or	o, <u>and</u> address o ollateral in item t	f Assignee in item 7c <u>and</u> nam 3	ne of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified ab continued for the additional period provided by applicable law	ove with respect	to the security interest(s) of S	Secured Party	authorizing this Continuation	on Statement is
5. PARTY INFORMATION CHANGE:				······	
	GE name and/or a	address: CompleteADD	name: Complet		Give record name
6. CURRENT RECORD INFORMATION: Complete for Party Information Change			7b, <u>and</u> item 7d	to be deleted in	terii da di du
6a. ORGANIZATION'S NAME 78 DORRANCE CORP.					
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informati	ion Change provide	only one name (7a or 7h) (use evert fi	ill name: do not om	it modify or abbreviate any part of	f the Debtor's game)
7a. ORGANIZATION'S NAME	on Change - provide	uny une name (74 or Fb) (456 exect, 16	ag name, do not on	ne, moonly, or deblorate any part of	
OR 75. INDIVIDUAL'S SURNAME					
		****			
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
					USA
COLLATERAL CHANGE: Also check one of these four boxes: ADD Indicate collateral:	) collateral	DELETÉ collateral	RESTATE o	overed collateral	ASSIGN collateral
illulcate conateral.					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN	MENDMENT: F	Provide only one name (9a or 9)	b) (name of Ass	signor, if this is an Assignme	ent)
If this is an Amendment authorized by a DEBTOR, check here and provide read CRCANIZATION'S NAME Citizens Bank, N.A. formerly known	name of authorizing	-		· · · · · · · · · · · · · · · · · · ·	
OR 96. INDIVIDUAL'S SURNAME	TFIRST PERSON	JAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
SS. INDIVIDUAL O CONTRIBLE				-4-7	
10. OPTIONAL FILER REFERENCE DATA Debtor: 78 DORRANCE	E CORP.				1315 27456