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	8134870 Date:	. 0/1/2017 2	2. 10.00 P	IVI	
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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@woltersklux	wer.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 5909	- BANK OF				
CT Lien Solutions	59088631				
P.O. Box 29071 Glendale, CA 91209-9071	kiri				
1	1				
File with: Secretary of State, RI		THE ABOVE	SPACE IS FO	OR FILING OFFICE	USE ONLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use					
name will not fit in line 1b, leave all of item 1 blank, check here and and 1a. ORGANIZATION'S NAME	I provide the Individual Debtor info	rmation in item 10 of t	the Financing Sta	tement Addendum (Fo	orm UCC1Ad)
Atlantic Golf Centers, Ltd.					
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	IE.	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
to, MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
754 Newport Avenue	Attleboro		МА	02703-5935	USA
2a. ORGANIZATION'S NAME					
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	Έ		val name(s)/initial(s)	SUFFIX
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	E	ADDITION	VAL NAME(S)/INITIAL(S) POSTAL CODE	SUFFIX
25. INDIVIDUAL'S SURNAME 26. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNEE	СІТУ		STATE	POSTAL CODE	
DR 2b. INDIVIDUAL'S SURNAME 2c. MAILING ADDRESS	СІТУ		STATE	POSTAL CODE	
2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNEE SECURIORS) 3a. ORGANIZATION'S NAME Bank of America, N.A.	СІТУ	only <u>one</u> Secured Par	STATE ty name (3a or 3l	POSTAL CODE	COUNTRY
2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNEE Bank of America, N.A. 3b. INDIVIDUAL'S SURNAME	CITY DR SECURED PARTY): Provide of First Personal Name	only <u>one</u> Secured Par	STATE ty name (3a or 3t	POSTAL CODE D) NAL NAME(SYINITIAL(S)	COUNTRY
2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR BANK OF AMERICA, N.A. 3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS ONE INDEPENDENCE CENTER - NC1-001-05-13, 101 NTRYON ST	CITY PR SECURED PARTY): Provide of First Personal Name of City CHARLOTTE	only <u>one</u> Secured Par	STATE ty name (3a or 3l	POSTAL CODE	COUNTRY
2b. INDIVIDUAL'S SURNAME 2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNORMAN ASSIGNO	FIRST PERSONAL NAM CITY CHARLOTTE Illowing described property accounts, letter of credit ri account. (b) All inventory cribed in the attached Equins, attachments and other accements for any Collateral, benefits and property recetaining to any Collateral, we	now owned or he ghts, and genera (c) All equipment pescription additions to the C all cash or non-civable on accounthether in the form	ADDITION STATE NC ereafter acqui I intangibles r and fixtures in, if any). (d) collateral, and ash proceeds t of the Collater	POSTAL CODE POSTAL CODE 28255-0001 red by the Debtor related thereto; an now owned or her All negotiable an all tools, parts an (including insura teral, and all supp photograph, micr	COUNTRY SUFFIX COUNTRY USA (the "Collateral"): d all returned or reafter acquired by d nonnegotiable d equipment used nce proceeds), orting obligations ofilm or electronic
2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNEE Bank of America, N.A. 3a. ORGANIZATION'S NAME Bank of America, N.A. 3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS ONE INDEPENDENCE CENTER - NC1-001-05-13, 101 N TRYON ST 4. COLLATERAL: This financing statement covers the following collatera All Business Assets - Hot Docs Security Agreement The for (a) All accounts, and all chattel paper, instruments, deposit repossessed goods which, on sale or lease, resulted in an at the Debtor, (including, but not limited to, the equipment described by the covering any Collateral. (b) All accession in connection with the Collateral. (c) All substitutes or replace products, rents and profits of the Collateral, and all income, covering any Collateral. (g) All books, data and records per media, including but not limited to any computer-readable in Records").	FIRST PERSONAL NAM CITY CHARLOTTE I: Illowing described property accounts, letter of credit ri account. (b) All inventory. cribed in the attached Equi ns, attachments and other accements for any Collateral, benefits and property rece taining to any Collateral, when any and any computer is	now owned or he ghts, and genera (c) All equipment prenent Description additions to the C all cash or non-civable on accounthether in the form software necessariant and instructions)	ADDITION STATE NC ereafter acqui i intangibles r t and fixtures n, if any). (d) sollateral, and ash proceeds t of the Collat n of a writing, ny to process being administer 6b. Check only Agricult	POSTAL CODE NAL NAME(SYINITIAL(S) POSTAL CODE 28255-0001 red by the Debtor elated thereto; an now owned or her All negotiable an all tools, parts an s (including insura reproperties and all supp photograph, micr such memory ("E	COUNTRY SUFFIX COUNTRY USA (the "Collateral"): d all returned or reafter acquired by d nonnegotiable d equipment used nce proceeds), orting obligations ofilm or electronic books and