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	CC FINANCING STATEMENT AMENDMENT LLOW INSTRUCTIONS						
A.	NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141		1				
В.	E-MAIL CONTACT AT FILER (optional)  CLS-CTLS Glendale Customer Service@wolterskluwer.com						
C.	SEND ACKNOWLEDGMENT TO: (Name and Address) 34785 - BRO		1				
	— CT Lien Solutions 59406	933					
	P.O. Box 29071 Glendale, CA 91209-9071 RIRI						
ŀ		ı					
	File with: Secretary of State, RI		THE ABOVE SPA	CE IS FO	OR FILING OFFIC	E USE	ONLY
	NITIAL FINANCING STATEMENT FILE NUMBER 1211980730 12/18/2012 SS RI		1b. This FINANCING STATE (or recorded) in the REAI Filer: attach Amendment Ado	ESTATE	RECORDS	•	•
2.	TERMINATION: Effectiveness of the Financing Statement identified above i Statement	s terminated with	respect to the security interest(s	of Secure	ed Party authorizing t	his Tem	nination
3. [	ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, a For partial assignment, complete items 7 and 9 and also indicate affected or			ssignor in	item 9		
4. [2	CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law	with respect to the	he security interest(s) of Secured	Party aut	norizing this Continua	ition Sta	tement is
5.	PARTY INFORMATION CHANGE:						
c	mieck one of mese two boxes.	of these three box		0	A- 2 DELETE		
	his Change affects Debtor or Secured Party of record item 6	GE name and/or a a or 6b; <u>and</u> item 7	a or 7b and item 7c 7a or 7b,	e: Comple <u>and</u> item 7	c to be dele		ive record name m 6a or 6b
6. C	URRENT RECORD INFORMATION: Complete for Party Information Change - 6a. ORGANIZATION'S NAME	provide only <u>one</u>	name (6a or 6b)				
	SPORTS MARKETING GROUP INC						
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S	)	SUFFIX
7 C	HANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Ch	ange - provide only o	ne name (7a or 7h) (use exact full name:	do not omit u	nodity or abbreviate any na	ut of the C	lebtor's name)
	7a, ORGANIZATION'S NAME				,,, ,		
OR	7b. INDIVIDUAL'S SURNAME						
	TO INCIPAL O GOI GENERAL						
	INDIVIDUAL'S FIRST PERSONAL NAME						
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
7c. N	MAILING ADDRESS	CITY	1. · · · · · · · · · · · · · · · · · · ·	STATE	POSTAL CODE		COUNTRY
				O I A I E	7 001712 0002		COCINI
8.	COLLATERAL CHANGE: Also check one of these four boxes: ADD	collateral [	DELETE collateral R	ESTATE	covered collateral	☐ AS	SIGN collateral
	Indicate collateral:						
	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME			ame of Ass	ignor, if this is an Ass	ignment	)
	9a, ORGANIZATION'S NAME		p				
OR :	BANK RHODE ISLAND	,					
-"\	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	LNAME	ADDITION	IAL NAME(S)INITIAL(S)	)	SUFFIX
10. C	PTIONAL FILER REFERENCE DATA: Debtor Name: SPORTS MARK	KETING GRO	UP INC	<u> </u>	,		

RI SOS Filing Number: 201718230950 Date: 6/23/2017 4:03:00 PM

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Loan Servicing 725 - 0725

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	CC FINANCING STATEMENT AMEND LLOW INSTRUCTIONS	MENT ADDEN	DUM			
.11.	INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1211980730 12/18/2012 SS RI	1a on Amendment form				
_	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as	s item 9 on Amendment for	m	1		
	12a. ORGANIZATION'S NAME					
	BANK RHODE ISLAND					
OF	12b. INDIVIDUAL'S SURNAME					
	FIRST PERSONAL NAME					
	1					
	ADDITIONAL NAME(SYINITIAL(S)		SUFFIX	THE AROVE SPACE	E IS FOR FILING OFFICE US	SE ONLY
13,	Name of DEBTOR on related financing statement (Name of a currone Debtor name (13a or 13b) (use exact, full name; do not omit,	rent Debtor of record requi , modify, or abbreviate any	ted for indexing part of the Debi	purposes only in some filing	ng offices - see Instruction item	
	13a, ORGANIZATION'S NAME SPORTS MARKETING GROUP INC		•	<u>,                                      </u>		
OR	13b. INDIVIDUAL'S SURNAME	FIRST PERS	ONAL NAME	ADO	DITIONAL NAME(SYINITIAL(S)	SUFFIX
	NK RHODE ISLAND - 445 PUTNAM PIKE, SMITHFIE		17. Descript	ion of real estate:		
16.	covers timber to be cut covers as-extracted collateral  Name and address of a RECORD OWNER of real estate describe (if Debtor does not have a record interest):	is filed as a fixture filing and in item 17	1			
18.	MISCELLANEOUS: 59406933-RI-0 34785 - BROOKLINE BANK	BANK RHODE ISLAND	)	File with: Secretary of State, F	RI Loan Servicing 725 - 0725	311