RI SOS Filing Number: 201718332410 Date: 7/19/2017 1:04:00 PM

| UCC FINANCING STATEMENT AMEN FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858 B. E-MAIL CONTACT AT FILER (optional) SPRFilling@cscinfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) | | | | |
|---|--|---|---|---|
| Corporation Service Company 801 Adlai Stevenson Drive Springfield IL 62703 Filingacks@cscinfo.co | lied In: Rhode Island (S.O.S.) | <u> </u> | ACE IS FOR FILING OFFICE USE | |
| 1a. INITIAL FINANCING STATEMENT FILE NUMBER 201211925650 12/05/2012 | | (or recorded) in the REA | EMENT AMENDMENT is to be filed [fo .L ESTATE RECORDS ddendum (Form UCC3Ad) <u>and</u> provide Det | • |
| 2. TERMINATION: Effectiveness of the Financing Statement id | entified above is terminated a | | | |
| Statement 3. ASSIGNMENT (full or partial): Provide name of Assignee in For partial assignment, complete items 7 and 9 and also indicate the state of the st | | | of Assignor in item 9 | |
| CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law | identified above with respect | to the security interest(s) of Se | cured Party authorizing this Continua | tion Statement is |
| . 🗖 🗖 | CHANGE name and/or a | | me: Complete item DELETE name | : Give record name |
| This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Infor 6a. ORGANIZATION'S NAMEBASHA RESTAURANT OR | & BAR, INC. | one name (6a or 6b) | o, <u>and</u> item 7cto be deleted in | |
| 6. CURRENT RECORD INFORMATION: Complete for Party Infor | mation Change - provide only | one name (6a or 6b) | and item 7c to be deleted in | SUFFIX |
| 6. CURRENT RECORD INFORMATION: Complete for Party Infor | **BAR, INC. FIRST PERSON | one name (6a or 6b) | and item 7c to be deteted in | SUFFIX |
| CURRENT RECORD INFORMATION: Complete for Party Information: Ga. ORGANIZATION'S NAMEBASHA RESTAURANT Gb. INDIVIDUAL'S SURNAME 7. CHANGED OR ADDED INFORMATION: Complete for Assignment of the complete for Party Information: | **BAR, INC. FIRST PERSON | one name (6a or 6b) | and item 7c to be deteted in | SUFFIX |
| CURRENT RECORD INFORMATION: Complete for Party Information: Ga. ORGANIZATION'S NAMEBASHA RESTAURANT Gb. INDIVIDUAL'S SURNAME 7. CHANGED OR ADDED INFORMATION: Complete for Assignment of Ta. ORGANIZATION'S NAME | **BAR, INC. FIRST PERSON | one name (6a or 6b) | and item 7c to be deteted in | SUFFIX |
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| 6. CURRENT RECORD INFORMATION: Complete for Party Information 6a. ORGANIZATION'S NAMEBASHA RESTAURANT OR 6b. INDIVIDUAL'S SURNAME 7. CHANGED OR ADDED INFORMATION: Complete for Assignment of 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Also check ppg of these four boxes Indicate collateral: | BAR, INC. FIRST PERSON r Party Information Change - provide CITY ADD collateral | one name (6a or 6b) IAL NAME only one name (7a or 7b) (use exact, full r DELETE collateral | and item 7c to be deleted in ADDITIONAL NAME(S)/INITIAL(S) are, do not omit, modify, or abbreviate any part | SUFFIX SUFFIX COUNTRY USA ASSIGN collateral |
| 6. CURRENT RECORD INFORMATION: Complete for Party Information 6a. ORGANIZATION'S NAMEBASHA RESTAURANT OR 6b. INDIVIDUAL'S SURNAME 7. CHANGED OR ADDED INFORMATION: Complete for Assignment of 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(\$)/INITIAL(\$) 7c. MAILING ADDRESS 8. COLLATERAL CHANGE: Also check ppg of these four boxes Indicate collateral: | BAR, INC. FIRST PERSON Party Information Change - provide CITY CITY CITY CITY CITY ADD collateral | one name (6a or 6b) IAL NAME only one name (7a or 7b) (use exact, full r | and item 7c to be deleted in ADDITIONAL NAME(S)/INITIAL(S) are, do not omit, modify, or abbreviate any part | SUFFIX SUFFIX COUNTRY USA ASSIGN collateral |