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116	C FINANCING STATEMENT AMENDMENT						
	LOW INSTRUCTIONS						
A, I	NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141]				
B, I	-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.cor	n					
C .:	SEND ACKNOWLEDGMENT TO: (Name and Address) 34785 - BRO	OOKLINE	1				
	CT Lien Solutions 6057 P.O. Box 29071	7139					
	Glendale, CA 91209-9071 RIRI						
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Ļ	File with: Secretary of State, RI			PACE IS FOR FILING OFFICE US			
-	NITIAL FINANCING STATEMENT FILE NUMBER 312258350 3/12/2013 SS RI		(or recorded) in the RE	TEMENT AMENDMENT is to be filed (fo EAL ESTATE RECORDS Addendum (Form UCC3Ad) <u>and</u> provide Debto			
2. [TERMINATION. Effectiveness of the Financing Statement identified above	s is terminated with					
	Statement		<u> </u>	., .			
3. [ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, For partial assignment, complete items 7 and 9 and also indicate affected			f Assignor in item 9			
4. 🛭	CONTINUATION: Effectiveness of the Financing Statement identified abo continued for the additional period provided by applicable law	ve with respect to	the security interest(s) of Security	red Party authorizing this Continuation S	statement is		
5. [PARTY INFORMATION CHANGE:			.			
	neck one of these two boxes — — — — — CHA		address CompleteADD r		Give record name		
	<u> </u>			7b, and item 7c to be deleted in	item 6a or 6b		
6. Ç	JRRENT RECORD INFORMATION: Complete for Party Information Change 6a. ORGANIZATION'S NAME.	- provide only on	g name (ba or bb)				
	RUGGIERI FLOORING, INC.						
OR	65 INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAVE	ADDITIONAL NAME(SYMITIAL(S)	SUFFIX		
7. C	HANGED OR ADDED INFORMATION: Complete for Assignment or Party Information	Change - provide only	ορη name (7s or 7b) (use exact, full re	me, do not omit, modify, or abbreviate any part of th	e Debtor's name)		
	7# ORGANIZATION'S NAME						
OR	75 INDOMENIALS SURNAME						
	76. INDIVIDUAL'S SURNAME						
	INDIVIOUAL'S FIRST PERSONAL NAME						
	(S)JAITINI(S)=MAN JANOITIDDA S'JAIJCIVIDNI				SJFFIX		
7c	MAILING ADDRESS	Тсіту		STATE POSTAL CODE	COUNTRY		
	Mento Abbrico	1		1 3372 3332	00011111		
8. [COLLATERAL CHANGE: Also check one of these four boxes:	DD coflateral	DELETE collateral	RESTATE covered collateral	ASSIGN coffateral		
	Indicate collateral:		_	_			
9. N	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS A	MENDMENT: P	rovide only one name (9a or 9b)) (name of Assignor, if this is an Assignm	ent)		
	this is an Amendment authorized by a DEBTOR, check here and provide	e name of authoriz			•		
	9a. ORGANIZATION'S NAME BANK RHODE ISLAND						
OR	96 INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIONAL NAVE(SYNITIAL(S)	SUFFIX		
10. (PTIONAL FILER REFERENCE DATA: Debtor Name: RUGGIERI F	LOORING. IN		<u> </u>			
	77139 Loan Servicing 725 - 0725			ser			

RI SOS Filing Number: 201718546060 Date: 9/14/2017 12:19:00 PM

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 201312258350 3/12/2013 SS RI 12, NAME OF PARTY AUTHORIZING THIS AMENDMENT. Same as item 9 on Amendment form 12a ORGANIZATION'S NAME BANK RHODE ISLAND OR 125. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some fling offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit 13a. ORGANIZATION'S NAME RUGGIERI FLOORING, INC. 135 INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)THITIAL(S) SUFFIX 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): Debtor Name and Address: RUGGIERI FLOORING, INC. - 1191 PONTIAC AVENUE, CRANSTON, RI 02920 Secured Party Name and Address: BANK RHODE ISLAND - ONE TURKS HEAD PLACE, PROVIDENCE, RI 02903 17. Description of real estate 15. This FINANCING STATEMENT AMENDMENT. covers timber to be cut ____ covers as-extracted collateral ____ is filed as a fixture filing 16. Name and address of a RECORD OWNER of real estate described in item 17

Loan Servicing 725 - 0725 ser

BANK RHOOE ISLAND

File with Secretary of State, RI

18. MISCELLANEOLIS 60577139-RI-0 34785 - BROOKLINE BANK