JCC FINANCING STATEMENT AMENDME	NT.				
OLLOW INSTRUCTIONS	11				
A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141		7			
B. E-MAIL CONTACT AT FILER (optional)  CLS-CTLS_Glendale_Customer_Service@wolterskluwer.	com	1			
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 32814 -	THE				
Lien Solutions 608 P.O. Box 29071 Glendale, CA 91209-9071 RIF	879700 T				
File with: Secretary of State, RI	 	THE AB	OVE SPACE IS F	OR FILING OFFICE U	SE ONLY
a INITIAL FINANCING STATEMENT FILE NUMBER 14787 10/25/2002 SS RI		(or recorded)	in the REAL ESTATE	IENDMENT is to be filed [ ERECORDS im UCC3Ad] and provide Deb	•
TERMINATION: Effectiveness of the Financing Statement identified a Statement	bove is terminated wit	h respect to the securit	y interest(s) of Securi	ed Party authorizing this T	Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or For partial assignment, complete items 7 and 9 and also indicate affe			name of Assignor in	rtem 9	<del></del>
CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	above with respect to	the security interest(s)	of Secured Party aut	horizing this Continuation	Statement is
PARTY INFORMATION CHANGE					<del></del>
Cireck Original diseases two dockes	ck <u>one</u> of these three bo CHANGE name and/or		ADD name. Comple	ete item DELETE name	e: Give record name
	tem 6a or 65, and item		7a or 7b, <u>and</u> item 7		n item 6a or 6b
CURRENT RECORD INFORMATION. Complete for Party Information Cha	ange - provide only <u>on</u>	e name (6a or 6b)			
CHARLIE'S HEATING LLC					
R 66. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ОПСОА	NAL NAME(SYNITIAL(S)	SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or Purity Information	Mana Channa - mandra andu	one same (In or In) /use o	and full a sme do est and	months or whitenessia and out of	the Cabbar's assess
7a ORGANIZATIONS NAME	non one go - promocony	<u> </u>	ned, to the time works only	mod y, or address dice by partici	an acons similar
76 INDIVIOUAL'S SURNAME	•				
INDIVIDUAL'S FIRST PERSONAL NAME					70
INDIVIDUAL'S ADDITIONAL NAME(SYNITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY	·	STATE	POSTAL CODE	COUNTRY
COLLATERAL CHANGE. Also check one of these four boxes.	ADD collateral	DELETE collatera	RESTATE	covered collateral	ASSIGN collateral

9, NAME OF SECURED PART	_	NG THIS AMENDMENT: Provide only one name (5	Da or 9b) (name of Assignor, if this is an Assignm	ent)
9a ORGANIZATION'S NAME	TRUST COMPANY	FIRST PERSONAL NAME	ADDITIONAL NAME(SYMITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE 60879700	E DATA: Debtor Name: CH WLM	ARLIE'S HEATING LLC	90369290	•

RI SOS Filing Number: 201718635340 Date: 10/5/2017 11:09:00 AM

8. COLLATERAL CHANGE. Also check one of these four boxes. ADD collateral

Indicate collateral:

	NITIAL FINANCING STATEMENT FILE NUMBER: Same as itel 787 10/25/2002 SS RI	m 1a on Amendme	nt form			
	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same	as item 9 on Ameri	dment form			
	120. ORGANIZATION'S NAME THE WASHINGTON TRUST COMPANY					
R-	120. INDIVIDUAL'S SURNAME					
-	FIRST PERSONAL NAME			_		
}	ADDITIONAL NAME(SYINITIAL(S)		SUFFIX			.=
3. N	Name of DEBTOR on related financing statement (Name of a cong. Debtor name (13a or 13b) (use exact, full name; do not orn	urrent Debtor of rec lit, modify, or abbre	cord required for in viate any part of the	dexing purposes only	OVE SPACE IS FOR FILING OFFICE US in some fling offices - see Instruction item e Instructions if name does not fit	
ſ	13a, ORGANIZATION'S NAME CHARLIE'S HEATING LLC					
R  -	13b INDIVIDUAL'S SURNAME	FI	IRST PERSONAL NA	ME	ADDITIONAL NAME(SYMITIAL(S)	SUFFIX
bi IA	ADDITIONAL SPACE FOR ITEM 8 (Collateral): Itor Name and Address: ARLIE'S HEATING LLC - PO BOX 61 , NORTH Ki ured Party Name and Address: E WASHINGTON TRUST COMPANY - PO BOX 5			STERLY, RI 0289	91	
bi HA	tor Name and Address: ARLIE'S HEATING LLC - PO BOX 61 , NORTH K ured Party Name and Address:			STERLY, RI 0289	91	
ebitAA edit	tor Name and Address: ARLIE'S HEATING LLC - PO BOX 61 , NORTH K ured Party Name and Address:	s12 23 BROAD	STREET, WE	STERLY, RI 0289		