FOR FILING OFFICE USE ONLY	
AMENDMENT is to be filed [for record] TE RECORDS Form UCC3Ad) and provide Debtor's name in item 13	
ured Party authorizing this Termination	
in item 9	
outhorizing this Continuation Statement is	
plete item DELETE name. Give record name in 7c. Dedected in item 6a or 6b.	
IONAL NAVE(SYNITIAL(S) SUFFIX	
nt, modify, or abbreviale any part of the Deblor's name)	
SUFFIX	

RI SOS Filing Number: 201718644630 Date: 10/6/2017 2:01:00 PM

UCC FINANCING STATEMENT AMENIFOLLOW INSTRUCTIONS	DMENT					
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@wolters	skluwer.com		1			
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 2	1371 - BANK	(OF	1			
Lien Solutions P.O. Box 29071	60893	$\overline{}$				
Glendale, CA 91209-9071	RIRI					
Edo with: Cogretant of State I	.		THE ABOVE	CDACE IS E	OR FILING OFFICE U	ISE ONI V
File with: Secretary of State, F	(Ι	-	.*		MENDMENT is to be filed	
678482 3/30/1998 SS RI			(or recorded) in the	REAL ESTATE		
TERMINATION Effectiveness of the Financing Statement kinds Statement	entified above is	s terminated wit	h respect to the security into	rest(s) of Secur	ed Party authorizing this	Termination
ASSIGNMENT (full or partial): Provide name of Assignce in a For partial assignment, complete items 7 and 9 and also indi				ie of Assignor in	item 9	
CONTINUATION: Effectiveness of the Financing Statement is continued for the additional period provided by applicable law		with respect to	the security interest(s) of Se	cured Party au	thorizing this Continuation	Statement is
5. PARTY INFORMATION CHANGE:						
Check one of these two boxes	ND Check one			D name Compl	ete item DELETE num	e. Give record name
This Change affects Debtor or Secured Party of record				or 7b. <u>and</u> item		n item 6a or 6b
6. CURRENT RECORD INFORMATION. Complete for Party Inform	ation Change -	provide only <u>on</u>	e name (Galor 6b)			
© ORGANIZATION'S NAME MICHAELSON FLUID POWER INC.						
OR 66 INDIVIDUAL'S SURNAME		FIRST PERSON	AL NAVE	ADDITIO	MAL NAME(S) INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or P	nati Information Chi		one name (20 or 7h) (use name to	diame do salami	and the are obtained as a sea of	The Deblor's seems)
70 ORGANIZATIONS NAME	ary resimilation cra	arge - provide or y	ore remerities for its constant	Transa, (40 Har day)	mounty, or acceptance any point or	ore Device's Fame)
OR 76. NOUDINGWAYE						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)			·			SUFFIX
7c MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
7E MULLING ALLORE SS				SIATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE Also check one of these four b	xxes ADD) collateral	DELETE collateral	RESTATE	covered collateral	ASSIGN collateral
Indicate collateral						
9. NAME OF SECURED PARTY OF RECORD AUTHORIZ				9b) (name of As	signor, if this is an Assigni	ment)
If this is an Amendment authorized by a DEBTOR, check here 93 ORGANIZATION'S NAME	and provide n	iame of authoriz	ing Debtor			
Bank of America, N.A., Successor By Merge	r to Fleet N	lational Bar	ık			
OR 95 INDIVIDUAL'S SURNAME		FIRST PERSON	IAL NAME	ADEMIC	MAL NAME(SYMITIAL(S)	SUFFIX
10 OPTIONAL FILER REFERENCE DATA: Debtor Name: Mil	CHAELSON	FLUID POW	ER INC.			1
60893550						
				_		

NITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a	on Amendment form		
3482 3/30/1998 SS RI			
NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as its	em 9 on Amendment form		
Bank of America, N.A., Successor By Merger to	Fleet National Bank		
126 INDIVIDUAUS SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(SYINITIAL(S)	SUFFIX		
1050500		HE ABOVE SPACE IS FOR FILING OFFICE US	
Name of DEBTOR on related financing statement (Name of a currer one Debtor name (13a or 13b) (use exact, full name; do not omit, m			n 13): Provide o
133. ORGANIZATION'S NAME MICHAELSON FLUID POWER INC.		<u></u>	
136. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(SYNITIAL(S)	Suffix
ADDITIONAL SPACE FOR ITEM 8 (Collateral):			
	onal Bank - 70 Batterson Park Road , Fa	armington, CT 06032	
cured Party Name and Address: ik of America, N.A., Successor By Merger to Fleet Natio	onal Bank - 70 Batterson Park Road , Fa	armington, CT 06032	
This FINANCING STATEMENT AMENDMENT:	onal Bank - 70 Batterson Park Road , Fa		
This FINANCING STATEMENT AMENDMENT:	17. Description of re		