

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

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@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 35775 - BROOKLINE	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	61265499 RIRI
File with: Secretary of State, RI	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME BBA Donuts Incorporated				
OR	1b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
1c. MAILING ADDRESS 6923 Post Road		CITY North Kingstown	STATE RI	POSTAL CODE 02852
				COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME MJ Donuts, Inc.				
OR	2b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
2c. MAILING ADDRESS 6166 Post Road		CITY North Kingstown	STATE RI	POSTAL CODE 02852
				COUNTRY USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME Bank Rhode Island				
OR	3b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3c. MAILING ADDRESS One Turks Head Place		CITY Providence	STATE RI	POSTAL CODE 02903
				COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

All assets of the Debtors of every kind and nature, wherever located, now owned or hereafter acquired, including without limitation the following categories of assets as may be defined in the Rhode Island Uniform Commercial Code, as amended from time to time, and as further governed, described and defined by a security agreement by and between the Debtors and the Secured Party: goods (including without limitation inventory, machinery and equipment and any accessions thereto), instruments (including without limitation promissory notes), documents, health care receivables, accounts and accounts receivables, consignments, chattel paper (whether tangible or electronic), deposit accounts, letter-of-credit rights (whether or not evidenced by writing), commercial tort claims, copyrights, copyright license(s), patents, patent license(s), trademarks, trademark license(s), securities and all other investment property, general intangibles (including without limitation payment intangibles and software) supporting obligations, all accessions and additions thereto and any and all products and proceeds of the foregoing. It being the intention of the parties hereto that the description of the collateral set forth herein be construed to include the broadest possible range of property and assets and all tangible and intangible personal property and fixtures of the Debtors of every kind and description, pursuant to the Rhode Island Uniform Commercial Code or applicable law as may be amended from time to time.

Re: Revolving Line of Credit to the Debtors

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box: Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

61265499

35775

Thomas K. Fitzgerald