UCC FINANCING STATEMENT **FOLLOWINSTRUCTIONS** A NAME & PHONE OF CONTACT AT FILER (optional) 1-800-858-5294 Corporation Service Company B E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com C SEND ACKNOWLEDGMENT TO (Name and Address) 1417 80112 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In Rhode Island THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S NAME. Provide only one Debtor name (1a or 1b) (use exact full name, do not crul, modify, or abbreviate any part of the Debtor's name), if any part of the Individual Debtor's name will not fit in line 15 leave all of item 1 blank, check here. [7] and provide the Individual Debtor information in tem 10 of the Financing Statement Addendum (Form UCC1Ad) 18 ORGANIZATION'S NAME Lemon & Line, LLC 15 INDIVIDUAL'S SURNAME FIRST PERSONAL NAME (S) ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 1c MAILING ADDRESS 421 Thames Street STATE POSTAL CODE COUNTRY Newport RI 02840 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 26 INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/ NIT AL(S) SUFFIX 2c MAILING ADDRESS POSTAL CODE 3 SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY). Provide only one Secured Party name (3a or 3b) 3a ORGANIZAT ON'S NAME Citizens Bank, N.A. 36 IND VIOUAL'S SURNAME FIRST PERSONAL NAME (S)_ALTIVIN(S) MAN JANOITICCA SUFFIX POSTAL CODE COUNTRY 36 MAILING ADDRESS One Citizens Plaza STATE Providence RI 02903 **USA** COULTATERAL. This financing statement covers the following collateral. All personal property of Debtor of every kind and nature, wherever located, whether now owned or hereafter acquired, including without limitation, the following categories of property as defined in Revised Article 9 of the Uniform Commercial Code: goods (including inventory, equipment, fixtures, farm products, and any accessories thereto), instruments (including promissory notes), documents, accounts (including health-care-insurance receivables), chattel paper (whether tangible or electronic), deposit accounts, letter-of-credit rights (whether or not the letter of credit is evidenced by a writing), commercial tort claims, securities and all other investment property, general intangibles (including payment intangibles and software), supporting obligations and any and all records of, accessions to and products and proceeds of the foregoing. Any term used herein which is defined in either (i) Article 9 of the Uniform Commercial Code as in effect in the jurisdiction in which this financing statement was signed or authenticated by the Debtor at the time it was so signed or authenticated or (ii) Article 9 of the Uniform Commercial Code as in effect at any relevant time in the jurisdiction in which 5. Check only / 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 6b. Check only if applicable and check only one box Manufactured Home Transaction Public-Finance Transaction A Debtor is a Transmitting Utility Agricultura Lien Non-UCC Filing 7. ALTERNATIVE DES GNATION (flapplicable). l essee/Lessor Cansignee/Consignar Bailee/Bailor SeFer/Buyer Licensee/Licensor 8 OPTIONAL FILER REFERENCE DATA 1417 80112

RI SOS Filing Number: 201819125010 Date: 2/1/2018 2:46:00 PM

UCC FINANCING STATEMENT ADDENDUM

FOLLOWINSTRUCTIONS							
9 NAME OF FIRST DEBTOR: Same as the falor to on Financing Statement, if the 15 was left blank because Individual Debtor name did not fit, check here							
9a ORGAN ZAT ON'S NAME							
Lemon & Line, LLC							
OR 96 :NDIV.DUAL'S SURNAME							
FIRST PERSONAL NAME							
ADDITIONAL NAVE(S)/INITAL(S)	Su	FFIX	THE ABOVE	CDACE	e eoe eu	ING OFFICE II	ISE ONI V
10 DEBTOR'S NAME Provide (10a or 10b) only one additional Debtor name or	Debtor name that	did not fit in line				rm UCC1) (use e	
do not omit modify or abbreviate any part of the Debtor's name) and enter the m	na ling address in l	ne 10c					
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OR 106 INDIVIDUAL'S SURNAME							
IND VIDJAL'S FIRST PERSONAL NAVE							
INDIVIDUAL'S ADDITIONAL NAME(S)(NITIAL(S)							SUFFIX
10c MAILING ADDRESS	CITY			STATE	POSTAL CO	ODE	COUNTRY
11 [T] ADDITIONAL SECURED PARTY'S NAME or ASSIGNO	L OR SECUREI	PARTY'S N	AME Provide or	ry one na	<u> </u> me (11a pr 1	1b)	1
118 ORGANIZATION'S NAME							
OR 115 INDIVIDUAL'S SURNAME	FIRST PERSON	AL NIAME		<u> </u>	NEL BANE	NUMBER (E)	ISUFFIX
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11c MAILING ADDRESS	C.TY			STATE	POSTAL CODE		COUNTRY
this financing statement is filed, has the meaning to bunder the more encompassing of the two definitions. personal property of the Debtor.							
13 This F.NANCING STATEMENT is to be filed (for record) (or recorded) in the	14 This FINANC	ING STATEMEN	.				
REAL ESTATE RECORDS (*applicable)		covers timber to be cut covers as Description of real estate			extracted coflatera is filed as a f		
15 Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest)	16 Description (real estate					
17 MISCELLANEOUS							