

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Lorena Castellanos 781-646-3900
B. E-MAIL CONTACT AT FILER (optional) lcastellanos@leaderbank.com
C. SEND ACKNOWLEDGMENT TO (Name and Address) <div style="border: 1px solid black; padding: 5px; width: fit-content;"> Lorena Castellanos c/o Leader Bank, N.A. 180 Massachusetts Avenue Arlington, MA 02474 </div>

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 Bananagrams Inc.				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 845 Allens Avenue		CITY Providence	STATE RI	POSTAL CODE 02905
			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				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY

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 Leader Bank, N.A.				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 180 Massachusetts Avenue		CITY Arlington	STATE MA	POSTAL CODE 02474
			COUNTRY USA	

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

First lien on all of the following whether now owned or hereafter acquired, and wherever located, and used or useful in the operation and/or running, of the business known as Bananagrams Inc. (referred to herein as the "Business"), located at 845 Allens Avenue, Providence, RI 02905-4432 (the "Premises") or in the construction or occupation of said Premises: [1] all personal property, vehicles, goods, equipment, inventory, equipment, machinery, furniture, fixtures, building supplies and appliances; [2] all investment property, semi-intangibles, instruments, chattel paper, documents, letters of credit rights and commercial tort claims; [3] all intangibles, accounts, depository accounts, and general intangibles (including without limitation payment intangibles, patents and applications, trademarks and applications, trade names, copyrights and applications, software, engineering drawings, service marks, customer lists, and goodwill); [4] all licenses, permits, rights and privileges; [5] all assets and all personal property of every kind and nature; and [6] all proceeds from the sale of any of the foregoing (including, without limitation, insurance proceeds).

Rena Nathanson, President

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 7 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor Is a Transferring Utility	6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignor/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailed/Bailor <input type="checkbox"/> Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA.	