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	PLSOS Filing Number: 2018192	14570	Da	te: 2/28/2018 12:	17:00 I	PM	
	C FINANCING STATEMENT AMENDMEN	.IT					
	OW INSTRUCTIONS			_			
A. N	AME & 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. 8	END ACKNOWLEDGMENT TO: (Name and Address) 32814 -	THE]			
l٢	 Lien Solutions 628	- 357981	\neg				
l	P.O. Box 29071		'				
	Glendale, CA 91209-9071 RIF	KI .					
با	File with: Secretary of State, RI			THE ABOVE SPA		OR FILING OFFICE	
	806041580 3/11/2008 SS RI			(or recorded) in the REA	AL ESTATE	RECORDS	•
2. [TFRMINATION: Effectiveness of the Financing Statement identified at Statement	bove is terminate	ed with	respect to the security interest(s) of Secure	d Party authorizing this	Termination
з [ASSIGNMENT (full or partial) Provide name of Assignoe in item 7a or For partial assignment, complete items 7 and 9 and also indicate affectives.				Assignor in	item 9	
4 2	CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	above with resp	ect to 1	he security interest(s) of Secure	d Party auth	nonzing this Continuation	on Statement is
5. [PARTY INFORMATION CHANGE						
С	inck the or triese two poxes	x <u>one</u> of these thi CHANGE name a			me Comple	to item DFLETE nai	me. Give record name.
_	is Change affects Debtor or Secured Party of record	item 6a or 6b, <u>and</u>	rtem 7	a or 7b and item 7c 7a or 7b	o, <u>and</u> item 7		d in item 6a or 6b
6 C	IRRENT RECORD INFORMATION Complete for Party Information Cha 6a (XRGANIZATION'S NAME	ange - provide or	n:y <u>one</u>	name (ha or bb)			
	DAVIN & KESLER, INC.						
OR	66 INDIVIDUAL'S SURNAME	FIRST PE	RSON	L NAME	ADDITIO	NAL NAME(SYNITIAL(S)	SUFFIX
7. C	IANGED OR ADDED INFORMATION: Complete for Assignment or Party Informa-	llor Change - provi	će only :	one rume (7a or 7b) (use exact, full nam	e do notomiti	modify or abbreviate any part	of the Deblor's name)
	70 ORGANIZATION'S NAME						
OR	76 INDIVIDUAL'S SURNAME						
	INDIVIDUAL'S FIRST PERSONAL NAME						
	INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)						SUFFIX
_					T	1	
7¢ 1	MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
8 [COLLATERAL CHANGE Also check and of these four boxes	ADD collatera	1	DELETE collateral	RESTATE	covered collateral	ASSIGN collateral
	Indicate collateral						
_				<u>-</u>			
	AMF OF SECURED PARTY OF RECORD AUTHORIZING THIS this is an Amendment authorized by a DEBTOR, check here. [7] and pri	S AMENDMEN ovide name of au			name of As	signor, if this is an Assig	inment)
ır	94 ORGANIZATION'S NAME	one ne or do	VILE	-9 -0 - 0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			<u>. </u>
OR	THE WASHINGTON TRUST COMPANY	Leiner	DCC+-	AL MANG	140000	AAL A AMERO JOURNALION	Ter serv
	96 INDIVIDUAL'S SURMAN'E	FIRST PE	.ĸson	AL NAVE	ΟΙΠΟ	NAL NAME(SYINITIAL(S)	SUFFIX
10	PTIONAL FILER REFERENCE DATA. Debtor Name: DAVIN &	KESLER, INC).).		1		
628	57981 WLM					91528870	

	TIAL FINANCING STATEMENT FILE NUMBER Same as dem 1a 06041580 - 3/11/2008 - SS RI	on Amendment for	n			
	AME OF PARTY AUTHORIZING THIS AMENDMENT. Same as its	om 9 on Amendment	form			
	23 ORGANIZATIONS NAME					
F	THE WASHINGTON TRUST COMPANY					
1,	3 MANUTUTICAL 65					
-	FIRST PERSONAL NAME					
\vdash	ADDITIONAL NAME(SJINITIAL(S)		SUFFIX			
				THE ABOVE S	SPACE IS FOR FILING OFFICE US	E ONLY
	ame of DEBTOR on related financing statement (Name of a currence Debtor name (13a or 13b) (use exact, full name: do not omit, m					13) Provide
13	34 ORGANIZATION'S NAME					
	DAVIN & KESLER, INC.		·			
13	35 INDIVIDUAL'S SURNAME	FIRST P	ERSONAL NAME			
to /I I ur	DDITIONAL SPACE FOR ITEM 8 (Collateral). OF Name and Address: N & KESLER, INC 24G DORSET MILE ROAD , EXI THE PARTY NAME AND ADDRESS: WASHINGTON TRUST COMPANY - 23 BROAD STR				ADDITIONAL NAME(SYNITIAL(S)	SUFFIX
oto VII	or Name and Address: N & KESLER, INC 24G DORSET MILL ROAD , EXI red Parly Name and Address:				ADDITIONAL NAME(SYNITIAL(S)	SUFFIX
The Na	or Name and Address: N & KESLER, INC 24G DORSET MILL ROAD , EXI red Parly Name and Address:	REET , WESTER	LY, RI 02891	ion of real estate	ADDITIONAL NAME(SYNITIAL(S)	SUFFED