

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294												
B E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com												
C SEND ACKNOWLEDGMENT TO (Name and Address) 1445 40292 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Rhode Island (S.O.S.)												
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY												
1a INITIAL FINANCING STATEMENT FILE NUMBER 025261 08/29/2003		1b ☐ This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS For <u>Amendment Addendum</u> (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13										
2 ☐ TERMINATION Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement.												
3 ☐ ASSIGNMENT (full or partial) Provide name of Assignee in item 7a or 7b, <u>and</u> address of Assignee in item 7c, <u>and</u> name of Assignor in item 9 For partial assignment, complete items 7 and 9 <u>and</u> also indicate affected collateral in item 8												
4 ☒ CONTINUATION Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.												
5 ☐ PARTY INFORMATION CHANGE Check <u>one</u> of these two boxes: ☐ Debtor or ☐ Secured Party of record AND Check <u>one</u> of these three boxes to: ☐ CHANGE name and/or address Complete item 6a or 6b <u>and</u> item 7a or 7b <u>and</u> item 7c ☐ ADD name Complete item 7a or 7b <u>and</u> item 7c ☐ DELETE name Give record name to be deleted in item 6a or 6b												
6 CURRENT RECORD INFORMATION Complete for Party Information Change - provide only <u>one</u> name (6a or 6b)												
6a ORGANIZATION'S NAME CONTINENTAL ENTERPRISES, INCORPORATED												
OR <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">6b INDIVIDUAL'S SURNAME</td> <td style="width: 30%;">FIRST PERSONAL NAME</td> <td style="width: 20%;">ADDITIONAL NAME(S)/INITIAL(S)</td> <td style="width: 10%;">SUFFIX</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>					6b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX				
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7 CHANGED OR ADDED INFORMATION Complete for Assignment or Party Information Change - provide only <u>one</u> name (7a or 7b) (use exact full name; do not omit, modify, or abbreviate any part of the Debtor's name)												
7a ORGANIZATION'S NAME Continental Enterprises, Incorporated												
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7c MAILING ADDRESS 20 CEDAR SWAMP RD												
CITY SMITHFIELD		STATE RI	POSTAL CODE 02917	COUNTRY USA								
8 ☐ COLLATERAL CHANGE Also check <u>one</u> of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral Indicate collateral												
9 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT Provide only <u>one</u> name (9a or 9b) (name of Assignor if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor												
9a ORGANIZATION'S NAME Citizens Bank, N.A. formerly known as RBS Citizens, N.A.												
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10. OPTIONAL FILER REFERENCE DATA Debtor: CONTINENTAL ENTERPRISES, INCORPORATED												

1445 40292