RI SOS Filing Number: 201921073090 Date: 5/8/2019 1:36:00 PM UCC FINANCING STATEMENT AMENDMENT **FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) B. E-MAIL CONTACT AT FILER (optional) loanoperations@rocklandtrust.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) **Rockland Trust Company** 30 South Main Street Middleboro, MA 02346 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE NUMBER 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS #201414127590 filed 7/30/2014 Filer attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in tem 13 TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination 3. ASSIGNMENT (full or partial): Provide name of Assigned in item 7a or 7b, and address of Assigned in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and 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: AND Check one of these three boxes to. Check one of these two boxes CHANGE name and/or address: Complete dem 6a or 6b, and item 7a or 7b and item 7c ADD name. Complete item 7a or 7b, and item 7c DELETE name. Give record name to be deleted in item 6a or 6b This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION. Complete for Party Information Change - provide only pop name (6a or 6b) 68 ORGANIZATION'S NAME Century Drywall Inc 66 INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only goal name (7a or 7b) (use exact, full name, do not omit intodity, or abbreviate any part of the Debtor's name) 7a ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S) SUFFIX 7c MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 8. COLLATERAL CHANGE: Also check one of these four baxes: ADD co lateral DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one 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 Rockland Trust Company 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10. OPTIONAL FILER REFERENCE DATA RI SOS