RI SOS Filing Number: 201921223080 Date: 6/14/2019 3:30:00 PM UCC FINANCING STATEMENT **FOLLOW INSTRUCTIONS** NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294 B E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com Filingacks@cscinfo.com SEND ACKNOWLEDGMENT TO (Name and Address) 1654 98807 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In. Rhode Island (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S NAME: Provide only one Debtor name (fallor 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 the 1b, leave at of item 1 blank, check here. [] and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 18 ORGANIZATION'S NAMESANTIS FARMS, LLC SUFFIX ADDITIONAL NAME(S)/INIT-AL(S) TO INDIVIDUAL'S SURNAME FIRST PERSONAL NAME STATE POSTAL CODE COUNTRY CITY 1c MAILING ADDRESS 23 HICKORY DR 02857 **USA** RΙ SCITUATE 2 DEBTOR'S NAME. Provide only one Debtor name (28 or 25) (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 kne 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 ORGANIZATIONS NAME ADDITIONAL NAME(S)/INITIAL(S) FIRST PERSONAL NAME SUFFIX 26 INDIVIDUALS SURNAME 2c MAILING ADDRESS STATE POSTAL CODE COUNTRY 3 SECURED PARTY'S NAME (o: NAME of ASSIGNEE of ASSIGNOR SECURED PARTY) Provide only one Secured Party name (3a or 3b) 34 ORGANIZATION'S NAMEWells Fargo Vendor Financial Services, LLC FIRST PERSONAL NAVE ADDITIONAL NAME(S)/INITIAL(S) 36 INDIVIDUAL'S SURNAME SJEEIX POSTAL CODE CITY STATE COUNTRY 30 MAILING ADDRESS PO Box 35701 59107 USA Billings 4 COLLATERAL This francing statement covers the following collateral This Financing Statement is to perfect Secured Party/Lessor's interest under a true lease transaction with the Debtor/Lessee. It is (i) being filed solely as a precaution in case, contrary to the intention of the parties, the transaction relating to the property described herein is adjudged to be other than a lease within the meaning of the Uniform Commercial Code, and (ii) not to be construed as an admission that said transaction is anything other than a true lease. This financing statement covers the equipment and other assets described below and/or on any annex, schedule and/or exhibit hereto (which is to be considered an integral part hereof), plus all existing and future replacements, exchanges and substitutions therefor, attachments, accessories, accessions and additions thereto, and insurance, lease, sublease and other proceeds thereof. 1 2019 BOBCAT COMPACT TRACK LOADER MODEL #T740 T4 S/N B3CA15349

Equipment:

5. Check goly if applicable and check goly one box. Collateral isheld 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 <u>only</u> if applicable and check <u>only</u> one box
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Nors-UCC Filing
7 ALTERNATIVE DESIGNATION (if applicable) Lessee/Lessor Consignee/Consignor [] Sefer/But	yer Bailee/Bailor Licensee/Licensor
8 OPTIONAL FILER REFERENCE DATA Indirect - 9413926002 - 2-7405749984	1654 98807