

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A NAME & 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 SEND ACKNOWLEDGMENT TO (Name and Address) <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="border: 1px solid black; padding: 5px;"> Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 </div> <div style="border: 1px solid black; padding: 5px; text-align: center;"> 70982649 RIRI </div> </div> <p style="text-align: center;">File with: Secretary of State, RI</p>	

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 Cowstail Deli & Creamery LLC				
OR				
1b INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c MAILING ADDRESS		CITY	STATE	POSTAL CODE
16 High St		Pascoag	RI	02859
				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 C T CORPORATION SYSTEM, AS REPRESENTATIVE				
OR				
3b INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c MAILING ADDRESS		CITY	STATE	POSTAL CODE
330 N Brand Blvd, Suite 700; Attn: SPRS		Glendale	CA	91203
				COUNTRY
				USA

4. **COLLATERAL** This financing statement covers the following collateral:
 This filing covers the following properties, assets and rights of Debtor, whether now owned or hereafter acquired (collectively the "Collateral"): (a) all personal property described below or on any exhibit attached hereto, which exhibit is incorporated by reference herein ("Specified Items"); (b) any and all additions, replacements, parts, or accessories to the Specified Items; (c) any rental, chattel paper, accounts, security deposits, relating to the Specified Items or the Agreement; and (d) all proceeds of any and all of the foregoing. In the event serial numbers, vehicle identification numbers or similar information is included below, on an exhibit attached hereto or otherwise in the description of Collateral, such information has been added by Secured Party to the best of its information in an effort to avoid confusion but is not intended to, and shall not, limit the above description of Collateral.

This financing statement is filed to give notice that in case a court should determine that the transaction contemplated by the Lease Agreement constitutes a financing, the Debtor has granted to the Secured Party a first priority security interest in the Equipment and all substitutions, replacements and proceeds, including insurance proceeds, which security interest is perfected by this filing

Collateral Equipment Exhibit attached

5. Check only if applicable and check only one box. Collateral is held 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.
 Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable) Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA
 70982649

Exhibit 2 to Schedule "A" for Equipment List Contract #

EQUIPMENT

Equipment List Expanded

- 1 S&A HOLDINGS INC
- 1 STEEL WELDED AWNING WITH SUNBRELLA MD# CUSTOM
- 1 INSTALL

- 1 B & G RESTAURANT & SUPPLY, INC
- 1 HOBART MEAT SLICER MD# HS6-1

- 1 NEW BRUNSWICK INTERNATIONAL INC.
- 1 DIGI DIGITAL SCALE MD# SM-5100P
- 1 FREIGHT

- 2 NORTH AMERICAN RESTAURANT EQUIPMENT
- 1 N AMERICAN REFRIGERATED DELI CASE
- 1 PRECISION 3 LEVEL REFRIGERATED DISPLAT CASE
- 2 3 DOOR WORK TOP COOLER MD# AWRC-72
- 1 MEGA TOP SANDWICH PREP MD# ASP-60-24
- 2 N AMERICAN MEGA TOP PREP UNIT MD# ASP-48-18
- 1 PRECISION BACK BAR REFRIGERATOR
- 1 SANDWICH PREP MD# ASP-27-12
- 1 HOSHIZAKI UNDER COUNTER ICE MACHINE
- 1 BAKERS PRIDE 6 BURNER RANGE
- 1 PRECISION FLAT GRIDDLE
- 2 PITCO CS65 PROPANE
- 4 CASTFR SET

COPY VIEW