

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A NAME & PHONE OF CONTACT AT FILER (optional) <b>Alfred A. Veltri, Esq.</b>
B E-MAIL CONTACT AT FILER (optional) <b>broadway11@verizon.net</b>
C SEND ACKNOWLEDGMENT TO (Name and Address) <b>Anthony J. Paolino and Monica A. Paolino 450 Pippin Orchard Road Cranston, RI 02921</b>

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 <b>Lanni Properties, LLC</b>	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
OR 1b INDIVIDUAL'S SURNAME			
1c MAILING ADDRESS <b>16 Josephine Street</b>	CITY <b>North Providence</b>	STATE <b>RI</b>	POSTAL CODE <b>02904</b>
			COUNTRY <b>USA</b>

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	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
OR 2b INDIVIDUAL'S SURNAME			
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	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
OR 3b INDIVIDUAL'S SURNAME <b>Paolino</b>	<b>Anthony</b>	<b>J.</b>	
3c MAILING ADDRESS <b>450 Pippin Orchard Road</b>	CITY <b>Cranston</b>	STATE <b>RI</b>	POSTAL CODE <b>02921</b>
			COUNTRY <b>USA</b>

4 COLLATERAL This financing statement covers the following collateral:

**All now existing and after acquired equipment, machinery, inventory, raw materials, supplies, fixtures, accounts receivables, contract rights, general intangibles, full Class BV Liquor License, consumer goods, and software, including, but limited to: such assets as are referenced in Exhibit A attached hereto, including proceeds, renewals, replacements, additions or substitutions thereto, which all of said collateral is used in the operation of the Debtor's restaurant business.**

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  Manufacture-from Transaction  A Debtor is a Transmitting Utility  Agricultural Loan  Non-UCC Filing

6b Check only if applicable and check only one box:  Seller/Buyer  Buyer/Bailor  Consignee/Consignor

7 ALTERNATIVE DESIGNATION (if applicable)  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Buyer/Bailor  Consignee/Consignor

8 OPTIONAL FILER REFERENCE DATA:  
**For filing at the Department of State**

EXHIBIT "A"

TANGIBLE DETAIL

<u>Units</u>	<u>Description</u>
<u>1</u>	1 POS/REGISTER SYSTEM (D)
<u>1</u>	2 COMPUTER – FLAT SCREEN W/ACCESSORIES
<u>1</u>	2 LASER PRINTER/FAX/SCANNER
<u>1</u>	1 EXPRESSO MACHINE - DOMESTIC
<u>1</u>	1 HEAT TABLE – 4 LFT
<u>1</u>	1 CONVECTION OVEN – 1 TIER (D)

TANGIBLE DETAIL

<u>Units</u>	<u>Description</u>
<u>1</u>	1 FRIALATOR TWIN – FLR
<u>1</u>	1 CHAR GRILL – (TT) – 2 LFT
<u>1</u>	1 RANGE - 10 BURNER – 2 DR OVEN
<u>1</u>	1 BOX HOOD W/VENTING – 16 LFT
<u>1</u>	1 ICE CUBE DISPENSER – FLR – SML
<u>1</u>	1 COUNTER REFRIGERATOR 5 LFT
<u>1</u>	1 BEER COOLER - 6LFT – FLR
<u>3</u>	1 FREEZER – UPRIGHT – DOMESTIC – 1 DR
<u>1</u>	1 REACH IN COOLER – 2 DR
<u>1</u>	1 WALK IN COOLER – 8’ X16’ LFT
<u>1</u>	1 BAR – FORMICA TOP - COMPLETE – 16 LFT
<u>1</u>	1 BACK BAR – FORMICA TOP - COMPLETE – 12 LFT
<u>12</u>	1 BAR CHAIRS
<u>80</u>	1 SIDE CHAIRS
<u>17</u>	1 TABLES – PEDESTAL – LG
<u>6</u>	1 TABLES – PEDESTAL – SML
<u>4</u>	1 TABLES – WORK – 6’+/-
<u>1</u>	1 TUB/SINK
<u>1</u>	1 RECEPTION PODIUM
<u>1</u>	1 MISC ITEMS W/SILVER/CHINA/UTENSILS/ETC
<u>1</u>	6 INVENTORY/WHOLESALE – RETAIL INV

Total Tangible Detail